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Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

P	art 1. Identify Yo	ourself		
	Your full name		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Tour full name			
	Write the name that i government-issued p		JIM	
THE STANFOLD	identification (for exa your driver's license	ımple,	First name	First name
	passport).		Middle name	Middle name
	Bring your picture		OSHANA	
	identification to your with the trustee.	meeting	Last name	Last name
			Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2.	All other names y	70U	কে প্ৰকাশন সংস্থান কৰা কৰা কৰিবলৈ সামৰ কৰিবলৈ কৰি কৰিবলৈ কৰিবলৈ কৰিবলৈ	
	have used in the I years	last 8	First name	First name
	Include your married maiden names.	or	Middle name	Middle name
			Last name	Last name
			First name	First name
			Middle name	Middle name
			Last name	Last name
V288526400				
3.	Only the last 4 dig		xxx - xx - <u>0 5 3 9</u>	xxx - xx
	number or federal	۱	OR	OR
	Individual Taxpayer Identification number (ITIN)		9 xx - xx	9 xx - xx

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Debtor 1 JIM OSHA		Case number (if known)
rust Name Middle	e Name Lest Name	
	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4. Any business names and Employer Identification Numbers (EIN) you have used in	☐ I have not used any business names or EINs.	☐ I have not used any business names or EINs.
the last 8 years	Business name	Business name
Include trade names and doing business as names	Business name	Business name
	EIN	EIN
	EIN	EIN
5. Where you live		If Debtor 2 lives at a different address:
	695 BAXTER LANE	
	Number Street	Number Street
	HOFFMAN ESTATES IL 60169 City State ZIP Code	City State ZIP Code
	COOK COUNTY	
	County	County
	If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
	Number Street	Number Street
	P.O. Box	P.O. Box
	City State ZIP Code	City State ZIP Code
5. Why you are choosing	Check one:	$Check \ one:$
this district to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

De	ebtor 1 JIM OSHAN First Name Middle Nat	A me	Last Name	ne	Case number (# k	nown)
Pa	art 2: Tell the Court Abou	ut Your B	ankruj	ptcy Case		
7.	The chapter of the Bankruptcy Code you	Check o for Bank	ne. (For ruptcy (l	r a brief description of each, see <i>Not</i> i (Form 2010)). Also, go to the top of p	ice Required by 11 age 1 and check ti	U.S.C. § 342(b) for Individuals Filing he appropriate box.
	are choosing to file under	☑ Cha				
		☐ Cha	pter 11			
		☐ Cha	oter 12	2		
		☐ Cha	oter 13	3		
8.	How you will pay the fee	loca your subr with I nee Appo	court f self, you nitting y a pre-p ed to polication uest thaw, a ju than 18 the fee	for more details about how you reput may pay with cash, cashier's your payment on your behalf, your printed address. The pay the fee in installments. If you for Individuals to Pay The Filing that my fee be waived (You may budge may, but is not required to, 50% of the official poverty line the	may pay. Typical check, or money ur attorney may bu choose this operation of the control of the	order. If your attorney is pay with a credit card or check oftion, sign and attach the ents (Official Form 103A). Ition only if you are filing for Chapter 7, and may do so only if your income is ar family size and you are unable to nust fill out the Application to Have the
9.	Have you filed for bankruptcy within the last 8 years?	☑ No ☐ Yes.	District	When	MM / DD / YYYY	Case number
			District	t When		Case number
					MM / DD / YYYY	
			District	When	MM / DD / YYYY	Case number
10.	Are any bankruptcy cases pending or being	No No				
	filed by a spouse who is	☐ Yes.	Debtor			Relationship to you
	not filing this case with you, or by a business partner, or by an affiliate?		District	When	MM / DD / YYYY	Case number, if known
			Debtor	*****		Relationship to you
			District	When	MM / DD / YYYY	Case number, if known
11.	Do you rent your residence?	☑ No. ☐ Yes.	resider	our landlord obtained an eviction judgnce?		and do you want to stay in your
			☐ Yes	o. Go to line 12. es. Fill out <i>Initial Statement About an</i> s bankruptcy petition.	Eviction Judgment	t Against You (Form 101A) and file it with

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Debtor 1 JIM OSHAN First Name Middle Nam	Case number (if known)	
Report About Any I	Businesses You Own as a Sole Proprietor	
Are you a sole proprietor	☑ No. Go to Part 4.	
of any full- or part-time business?	☐ Yes. Name and location of business	
A sole proprietorship is a	_ Test Harris and Issairsh & Besiness	
business you operate as an individual, and is not a	Name of business, if any	
separate legal entity such as a corporation, partnership, or		
LLC.	Number Street	
If you have more than one sole proprietorship, use a		
separate sheet and attach it to this petition.		
to the pendon.	City State ZIP Code	
	Check the appropriate box to describe your business:	
	☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))	
	☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))	
	Stockbroker (as defined in 11 U.S.C. § 101(53A))	
	☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))	
	☐ None of the above	
are you a small business debtor? For a definition of small business debtor, see 11 U.S.C. § 101(51D).	 any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B). ✓ No. I am not filing under Chapter 11. □ No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definit the Bankruptcy Code. □ Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in 	
	Bankruptcy Code.	tne
Report if You Own	or Have Any Hazardous Property or Any Property That Needs Immediate Attention	
. Do you own or have any	☑ No	
property that poses or is	☐ Yes. What is the hazard?	
alleged to pose a threat of imminent and	Tros. What is the hazard:	
identifiable hazard to public health or safety?		
Or do you own any		
property that needs immediate attention?	If immediate attention is needed, why is it needed?	
For example, do you own perishable goods, or livestock		
that must be fed, or a building		
that needs urgent repairs?	Where is the property?	
	Where is the property? Number Street	***************************************
		-
	City State 7IP Code	ρ.

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Debtor 1

JIM OSHANA

I ast Name

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

Α	bo	ut	De	bt	or	1	١

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not	required	to	receive	а	briefing	about
credit co	ounseling	b	ecause o	١f		

I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

l am	not	require	i to	receive	а	briefing	about
				ecause (

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ **Disability.** My physical disability causes me to be unable to participate in a briefing in person, by phone, or

through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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C Last Name	Case number	(if known)
itions for Reporting Purposes		
as "incurred by an individual pr No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily money for a business or invest No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you ow	business debts? Business determent or through the operation of	household purpose." Pbts are debts that you incurred to obtain the business or investment.
Yes. I am filing under Chapter 7	. Do you estimate that after any	exempt property is excluded and et o distribute to unsecured creditors?
☑ 1-49 □ 50-99 □ 100-199 □ 200-999	☐ 1,000-5,000 ☐ 5,001-10,000 ☐ 10,001-25,000	☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than 100,000
□ \$0-\$50,000 □ \$50,001-\$100,000 ☑ \$100,001-\$500,000 □ \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
□ \$0-\$50,000 □ \$50,001-\$100,000 ☑ \$100,001-\$500,000 □ \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
correct. If I have chosen to file under Chapte of title 11, United States Code. I und under Chapter 7. If no attorney represents me and I d this document, I have obtained and I request relief in accordance with the I understand making a false stateme with a bankruptcy case can result in 18 U.S.C. §§ 152, 1341, 1519, and	er 7, I am aware that I may procederstand the relief available understand the relief available understand the rotice required by 11 Understand the notice required by 11 Understand the chapter of title 11, United Statent, concealing property, or obtain fines up to \$250,000, or impriso 3571.	eed, if eligible, under Chapter 7, 11,12, or 13 er each chapter, and I choose to proceed one who is not an attorney to help me fill out I.S.C. § 342(b). es Code, specified in this petition.
•	tions for Reporting Purposes 16a. Are your debts primarily as "incurred by an individual property of the primarily as "incurred by an individual property of the primarily as "incurred by an individual property of the primarily as "incurred by an individual property of the property of the primarily money for a business or invest of the property of	tions for Reporting Purposes 16a. Are your debts primarily consumer debts? Consumer as "incurred by an individual primarily for a personal, family, or No. Go to line 16b. 17 Yes. Go to line 17. 16b. Are your debts primarily business debts? Business of money for a business or investment or through the operation of No. Go to line 16c. 18c. State the type of debts you owe that are not consumer debts of No. I am not filing under Chapter 7. Go to line 18. 18c. State the type of debts you owe that are not consumer debts of No. I am not filing under Chapter 7. Do you estimate that after any administrative expenses are paid that funds will be available of No. 18c. State the type of debts you owe that are not consumer debts of No. 18c. I am filing under Chapter 7. Do you estimate that after any administrative expenses are paid that funds will be available of No. 18c. I am filing under Chapter 7. Do you of No. On N

Debtor 1 JIVI OSHANA First Name Middle Nami	Last Name	Case number (if known)	
For your attorney, if you are represented by one If you are not represented by an attorney, you do not need to file this page.	I, the attorney for the debtor(s) named in this petition, to proceed under Chapter 7, 11, 12, or 13 of title 11, U available under each chapter for which the person is ethe notice required by 11 U.S.C. § 342(b) and, in a casknowledge after an inquiry that the information in the solution in the solution of Attorney for Debtor	Inited States Code, and eligible. I also certify th se in which § 707(b)(4)	d have explained the relief at I have delivered to the debtor(s) (D) applies, certify that I have no
	TIMOTHY S. NEWBOLD (ARDC: 62884 Printed name TIMOTHY S. NEWBOLD, ATTORNEY A Firm name 191 WAUKEGAN ROAD Number Street SUITE 104		
	NORTHFIELD City	L State	60093 ZIP Code
	Contact phone <u>(773)</u> 496-4400	Email address	timothynewbold@hotmail.con

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

- You are an individual filing for bankruptcy, and
- Your debts are primarily consumer debts.

 Consumer debts are defined in 11 U.S.C.

 § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11— Reorganization
- Chapter 12— Voluntary repayment plan for family farmers or fishermen
- Chapter 13— Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:		Liquidation
	\$245	filing fee
	\$75	administrative fee
+	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law.

Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft:
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form—sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

\$200 filing fee + \$75 administrative fee \$275 total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

\$235 filing fee+ \$75 administrative fee\$310 total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition* for *Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html.

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Fill in this information to identify your case:							
Debtor 1	JIM		OSHANA				
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse, if filing)	First Name	Middle Name	Last Name				
United States I	Bankruptcy Court fo	or the: Northern District of Illinois					
Case number							
	(if known)						

☐ Check if this is an amended filing

12/15

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

	Your assets Value of what you own
Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$192,022.00
1b. Copy line 62, Total personal property, from Schedule A/B	\$8,802.00
1c. Copy line 63, Total of all property on Schedule A/B	\$ 200,824.00
art 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$210,117.94
Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$0.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$187,816.56
Your total liabilities	\$397,934.50
art 3: Summarize Your Income and Expenses	
Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$1,655.33
Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	_{\$} 4,693.45

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JIM

Det	otor 1	JIM First Name	Middle Name	Last Name	OSHANA	Cas	e number (if ki	nown)		
		r not rume	middle Haine	Last Name						
Pa	irt 4: A	nswer T	hese Questions	for Administrati	ve and Statist	ical Records				
6.	Are you f	iling for b	ankruptcy under C	hapters 7, 11, or 1	3?					
	No. Yes	ou have no	othing to report on th	is part of the form.	Check this box a	nd submit this fo	rm to the co	ourt with your other	schedules	S.
7.	What kind	d of debt o	io you have?	river stravelt at ratherin — underställene och avdisslagga dyndallstad er til gangag g	neerinneerin kunneerin koor oo oo koor oo	rester hi dilan sul semen didik tipik digipan gikeye diku engan ji engan sapika fingdi	erti urgent figuritist reptifir, getrijerijetisek	Pertinent in Service of the Control of the Service Andrews and the Service and province in the Control of the Service and Serv	ter (type-en till er tem typingt yr bellegy	kan yaka kashilinin sanangalakannike meminda mas marihikan de morimire ersem anda
	Your family	debts are , or housel	primarily consume hold purpose." 11 U	e r debts. Consumer S.C. § 101(8). Fill o	r debts are those out lines 8-9g for	"incurred by an i statistical purpos	individual pr ses. 28 U.S.0	rimarily for a person C. § 159.	nal,	
	Your this fo	debts are rm to the o	not primarily cons court with your other	umer debts. You h schedules.	ave nothing to re	port on this part	of the form.	Check this box an	d submit	
8.	From the Form 122	Statemen A-1 Line 1	nt of Your Current I 1; OR, Form 122B L	flonthly Income: C ine 11; OR, Form 1	opy your total cu 22C-1 Line 14.	rrent monthly inc	ome from O	Official	\$	4,211.15
9.	Copy the	following	special categories	of claims from Pa	ert 4, line 6 of Sc	:hedule E/F:	Total c	laim	na artificia (na Palación de Carlos de C	до об обородно в предоставления до обородно в под
	From Pa	art 4 on S	chedule E/F, copy	the following:						
	9a. Dome	stic suppo	rt obligations (Copy	line 6a.)			\$	0.00		
	9b. Taxes	and certa	in other debts you o	we the government	. (Copy line 6b.)		\$	0.00		
	9c. Claims	s for death	or personal injury w	hile you were intoxi	icated. (Copy line	e 6c.)	\$	0.00		
	9d. Stude	nt loans. (0	Copy line 6f.)				\$	30,102.00		
			ng out of a separation Copy line 6g.)	on agreement or div	orce that you did	not report as	\$	0.00		
	9f. Debts	to pensior	n or profit-sharing pl	ans, and other simil	ar debts. (Copy I	ine 6h.)	+ \$	0.00		
	9g. Total.	Add lines	9a through 9f.				\$	30,102.00		

	Case 18-06012	Doc 1	Filed 03/02/18 Document	Entered 03/02/18 1 Page 14 of 70	.0:45:22 Desc	: Main
Debtor 1 Debtor 2 (Spouse, if filin United State Case number	s Bankruptcy Court for the:	Middle Name Middle Name NORTHERN D	OSHANA Last Name Last Name			Check if this is an amended filing
Sche	edule A/B: I	Proper		once. If an asset fits in more t	han one category, list	12/15
responsib write your	ele for supplying correct of name and case number	information. I (if known). A	nplete and accurate as p f more space is needed, nswer every question.	ossible. If two married people attach a separate sheet to this al Estate You Own or Hav	are filing together, bo s form. On the top of a	th are equally
responsib write your Part 1: 1. Do you No. Yes.	ele for supplying correct or name and case number name and case number	information. I (if known). Al e nce, Buildir equitable into	plete and accurate as p f more space is needed, nswer every question. ng, Land, or Other Re erest in any residence, b	ossible. If two married people attach a separate sheet to this al Estate You Own or Have building, land, or similar property? Check all that apply. me unit building cooperative	are filing together, bo s form. On the top of a e an Interest In	th are equally ny additional pages, aims or exemptions. Put d claims on Schedule D:

If you own or have more than one, list here:

County

1.2.

Street address, if available, or other description		accription	What is the property? Check all that apply. Single-family home Duplex or multi-unit building	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.		
Olicot addices, ii at	Street address, if available, or other description		☐ Condominium or cooperative	Current value of the	Current value of the	
			Manufactured or mobile home	entire property?	portion you own?	
			☐ Land	\$	\$	
			☐ Investment property			
City	State	ZIP Code	☐ Timeshare	Describe the nature of interest (such as fee		
,	0.0.0	2 0000	Other	the entireties, or a lif		
			Who has an interest in the property? Check one	•	,,	

☐ Check if this is community property At least one of the debtors and another (see instructions)

Other information you wish to add about this item, such as local property identification number: $\underline{07-16-215-021-0000}$

Other information you wish to add about this item, such as local property identification number: _

County

Debtor 1 and Debtor 2 only

Debtor 1 only Debtor 2 only

Debtor 2 only

Debtor 1 and Debtor 2 only

lacksquare At least one of the debtors and another

☐ Check if this is community property

(see instructions)

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Page 15 of 70 Document JIM **OSHANA** Debtor 1 First Na What is the property? Check all that apply. Do not deduct secured claims or exemptions. Put ☐ Single-family home the amount of any secured claims on Schedule D: 13 Creditors Who Have Claims Secured by Property. Street address, if available, or other description Duplex or multi-unit building Current value of the Current value of the Condominium or cooperative entire property? portion you own? Manufactured or mobile home Land Investment property Describe the nature of your ownership ☐ Timeshare City State ZIP Code interest (such as fee simple, tenancy by Other the entireties, or a life estate), if known, Who has an interest in the property? Check one. Debtor 1 only County Debtor 2 only ☐ Check if this is community property Debtor 1 and Debtor 2 only (see instructions) At least one of the debtors and another Other information you wish to add about this item, such as local property identification number: 2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages 192,022,00 you have attached for Part 1. Write that number here. Part 2: **Describe Your Vehicles** Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No **∡** Yes Lexus Who has an interest in the property? Check one. Make: Do not deduct secured claims or exemptions. Put 3.1 the amount of any secured claims on Schedule D: Debtor 1 only IS 250 Model Creditors Who Have Claims Secured by Property. Debtor 2 only 2013 Year: Current value of the Current value of the Debtor 1 and Debtor 2 only 90,000 entire property? portion you own? Approximate mileage: At least one of the debtors and another Other information: 14,343.00 0.00 ☐ Check if this is community property (see Vehicle is leased. instructions) If you own or have more than one, describe here: VW Who has an interest in the property? Check one. Make: 3.2 Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Cabrio Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only 2000 Year: Current value of the Current value of the Debtor 1 and Debtor 2 only 150,000 entire property? portion you own? Approximate mileage: At least one of the debtors and another Other information: 1,000.00 1,000.00 ☐ Check if this is community property (see

instructions)

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OSHANA JIM Debtor 1 Case number (if known) Middle Name Mitsubishi Who has an interest in the property? Check one. Do not deduct secured claims or exemptions. Put 3.3 Make: the amount of any secured claims on Schedule D: Debtor 1 only **Eclipse** Model: Creditors Who Have Claims Secured by Property. Debtor 2 only 2009 Year: Current value of the Current value of the Debtor 1 and Debtor 2 only entire property? portion you own? 160,000 Approximate mileage: At least one of the debtors and another Other information: 2.393.00 2.393.00 Check if this is community property (see Co-owned with debtor's instructions) brother-in-law, Esha Kando. Who has an interest in the property? Check one. Do not deduct secured claims or exemptions. Put Make: the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Current value of the Current value of the Debtor 1 and Debtor 2 only entire property? portion you own? Approximate mileage: At least one of the debtors and another Other information: Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories Z No ☐ Yes Who has an interest in the property? Check one. Do not deduct secured claims or exemptions. Put Make 4 1 the amount of any secured claims on Schedule D: Debtor 1 only Creditors Who Have Claims Secured by Property. Model: Debtor 2 only Year: Debtor 1 and Debtor 2 only Current value of the Current value of the Other information: At least one of the debtors and another entire property? portion you own? ☐ Check if this is community property (see instructions) If you own or have more than one, list here: Who has an interest in the property? Check one. Do not deduct secured claims or exemptions. Put 42 Make: the amount of any secured claims on Schedule D: Debtor 1 only Creditors Who Have Claims Secured by Property. Model: Debtor 2 only Year: Current value of the Current value of the Debtor 1 and Debtor 2 only entire property? portion you own? Other information: At least one of the debtors and another ☐ Check if this is community property (see instructions) 5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages 3,393.00 you have attached for Part 2. Write that number here

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Debtor 1

JIM

OSHANA

Case number (if known)_

Pá	Describe Your Personal and Household Items		
Do	you own or have any legal or equitable interest in any of the following items?	Current val portion you Do not deduct or exemption	own? t secured claims
6.	Household goods and furnishings		
	Examples: Major appliances, furniture, linens, china, kitchenware		
	□ No		
	Yes. Describe Depreciated household goods and furnishings.	\$	1,500.00
7.	Electronics		
	Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games		
	No		
	Yes. Describe Television.	\$	250.00
8.	Collectibles of value		
	Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles No		
	Yes. Describe		
	- 103. D030(100,	\$	
9.	Equipment for sports and hobbies		
	Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments		
	☑ No · · · · · · · · · · · · · · · · · ·		
	Yes. Describe	\$	
10	Firearms		
10	Examples: Pistols, rifles, shotguns, ammunition, and related equipment		
	✓ No		
	Yes. Describe		
		Φ	
11	Clothes		
	Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories		
	□ No		
	Yes. Describe Necessary wearing apparel & shoes.	· · \$	400.00
	. Investor		
12	. Jewelry		
	Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver		
	☑ No		
	Yes. Describe	\$	
13	Non-farm animals		
	Examples: Dogs, cats, birds, horses		
	☑ No		
	Yes. Describe	\$	
14	Any other personal and household items you did not already list, including any health aids you did not list		
	☑ No		
	Yes. Give specific		
	information.	\$	
1.0	5. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached	T .	2 450 00
13	for Part 3. Write that number here	\$	2,150.00

Document

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Debtor 1

J	1	М	

Describe Your Financial Assets

OSHANA

Case number (if known)_

Do you own or have a	any legal or equitable interest in	any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
16. Cash <i>Examples:</i> Money	you have in your wallet, in your hon	ne, in a safe deposit box, and on hand when you file	your petition	
☑ No ☐ Yes		Ca	ash:	\$
and oth	ng, savings, or other financial accou	unts; certificates of deposit; shares in credit unions, butliple accounts with the same institution, list each.	rokerage houses,	
☐ No ☑ Yes		Institution name:		
	17.1. Checking account:	Citibank Checking Account (2878)		\$1,300.00
	17.2. Checking account:			\$
	17.3. Savings account:			\$
	17.4. Savings account:			\$
	17.5. Certificates of deposit:			\$
	17.6. Other financial account:		***************************************	\$
	17.7. Other financial account:			\$
	17.8. Other financial account:			\$
	17.9. Other financial account:			\$
	nds, or publicly traded stocks nds, investment accounts with brok Institution or issuer name:	erage firms, money market accounts		\$\$ \$\$
•	ed stock and interests in incorpo	orated and unincorporated businesses, including	an interest in	
☑ No	Name of entity:		of ownership:	
Yes. Give specinformation about	out)%	\$
them				\$
			776 %	\$

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Debtor 1	JIM		OSHANA	Case number (if known)		
	First Name	Middle Name La	st Name	The state of the s		
			er negotiable and non-negotiable ir			
Negotiab Non-neg	ole instruments i otiable instrume	nclude personal chec ents are those you car	ks, cashiers' checks, promissory note not transfer to someone by signing o	s, and money orders. r delivering them.		
🗹 No						
inforn	Give specific nation about	Issuer name:			\$	
uleiii.	*************************				Φ	
					,	
	ent or pension					
	s: Interests in IF	RA, ERISA, Keogh, 40	1(k), 403(b), thrift savings accounts,	or other pension or profit-sharing plans		
☐ No ☑ Yes	List each					
		Type of account:	Institution name:			
		401(k) or similar plan:			\$	
		Pension plan:	Teamster's Local 731 Pension	on (\$1,209.00/mn)	\$	1,209.00
		IRA:	(Debtor is only eligible to rec	eive pension at 65 years old)	Ψ	
					Φ	
		Retirement account:				
		Keogh:				
		Additional account:				
		Additional account:			\$	
Your sha Example		deposits you have m	ade so that you may continue service d rent, public utilities (electric, gas, wa			
☐ Yes		Ins	titution name or individual:			
☐ Yes		Ins	titution name or individual:		\$	
☐ Yes			titution name or individual:		\$ \$	
□ Yes		Electric:	titution name or individual:		\$ \$ \$	
Ŭ Yes∴		Electric: Gas: Heating oil:	titution name or individual:		\$ \$ \$	
☐ Yes		Electric: Gas: Heating oil:			\$ \$ \$ \$	
Ŭ Yes∴		Electric: Gas: Heating oil: Security deposit on ren			\$ \$ \$ \$ \$	
Ŭ Yes		Electric: Gas: Heating oil: Security deposit on ren Prepaid rent:			\$ \$	
□ Yes		Electric: Gas: Heating oil: Security deposit on ren Prepaid rent: Telephone:			\$ \$ \$	
↓ Yes		Electric: Gas: Heating oil: Security deposit on ren Prepaid rent: Telephone: Water:			\$ \$ \$	
		Electric: Gas: Heating oil: Security deposit on ren Prepaid rent: Telephone: Water: Rented furniture: Other:	tal unit:		\$ \$ \$	
23. Annuitie		Electric: Gas: Heating oil: Security deposit on ren Prepaid rent: Telephone: Water: Rented furniture: Other:			\$ \$ \$	
23. Annuitie ☑ No	s (A contract fo	Electric: Gas: Heating oil: Security deposit on ren Prepaid rent: Telephone: Water: Rented furniture: Other:	tal unit:		\$ \$ \$	
23. Annuitie ☑ No		Electric: Gas: Heating oil: Security deposit on ren Prepaid rent: Telephone: Water: Rented furniture: Other:	tal unit:		\$ \$ \$	

Case 18-06012 Filed 03/02/18 Entered 03/02/18 10:45:22 Desc Main Doc 1 Page 20 of 70 Document JIM **OSHANA** Dehtor 1 Case number (if known) 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). No 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ZI No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

Yes. Give specific information about them....

27. Licenses, franchises, and other general intangibles

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

No

Yes. Give specific

information about them....

\$________

Money or property owed to you?

Cur

Current value of the portion you own?
Do not deduct secured claims or exemptions.

28. Tax refunds owed to you

☐ No
☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years......

2017 Illinois State Income Tax Refund

 Federal:
 \$_____

 State:
 \$_____

29. Family support

Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

Ø No

Ø No

☐ Yes. Give specific information.....

Alimony:
Maintenance:
Support:

Local:

\$_____ \$_____

Divorce settlement: Property settlement: \$_____ \$

30. Other amounts someone owes you

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

ZI No

☐ Yes. Give specific information.....

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OSHANA

Document

JIM

Debtor 1

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Case number (if known)

31	_	rance; health savings account (HS	A); credit, homeowner's, or renter's insurance	
	✓ No ☐ Yes. Name the insurance company of each policy and list its value	Company name:	Beneficiary:	Surrender or refund value:
				\$
				\$
				\$
32	property because someone has died. No	t, expect proceeds from a life insu	rance policy, or are currently entitled to receive	
	Yes. Give specific information			\$
33.	Claims against third parties, whether Examples: Accidents, employment disprize No	utes, insurance claims, or rights to		\$
34	Other contingent and unliquidated cla	aims of every nature, including	counterclaims of the debtor and rights	www.co.d
04.	to set off claims No Yes. Describe each claim		counterclaims of the deptor and rights	\$
35.	Any financial assets you did not alread No Yes. Give specific information			\$
36.	Add the dollar value of all of your ent for Part 4. Write that number here		entries for pages you have attached	\$3,259.00
		e , metaka dai mandangan sagaran manangangan annanan and sadan sadan sagar 15 at fan far par par par san annan		
Pa	ort 5: Describe Any Busines	s-Related Property You C	Own or Have an Interest In. List any	y real estate in Part 1.
37.	Do you own or have any legal or equi	table interest in any business-re	elated property?	
	No. Go to Part 6.			
	Yes. Go to line 38.			
				Current value of the portion you own? Do not deduct secured claims or exemptions.
38.	Accounts receivable or commissions	you already earned		
	☑ No			·
	Yes. Describe			\$
39.			chines, rugs, telephones, desks, chairs, electronic devi	
	☑ No ☐ Yes. Describe			
	Tes. Describe			\$

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Debtor 1	JIM		OSHANA	Case number (if known)	
	First Name	Middle Name Last Name			
	ery, fixtures, e	quipment, supplies you use in bus	iness, and tools of y	our trade	
☑ No					
Yes	. Describe				\$
	and the same of th		***************************************		
1. Invento	ry	e transfer de la companya del la companya de la com			
•	. Describe		. Ny fisian'i Malain-André (ny fisian-de-amberia dia mpikambana dia mandra kaominina mpikambana dia mpikambana		
163	. Describe		et till 1888 til till som kvinnen er skjædelet kvinnen skile 1830 vikker og produkt pjelek kalantet projekt	or the control of the	
	ts in partnersh	ps or joint ventures			
☑ No					
□ Yes	. Describe	Name of entity:		% of ownership:	
				%	\$
				%	\$
				%	\$
	ner lists, mailir	g lists, or other compilations			
₩ No					
∟ Yes		include personally identifiable inf	ormation (as defined in	n 11 U.S.C. § 101(41A))?	
	□ No		Front recovered distribution and description of the contract o		······································
	Yes. Desc	ribe			\$
					····
4. Any bus	siness-related	property you did not already list			
₩ No		•			
	. Give specific				\$
info	rmation				-
					\$
		(***************************************		\$
					\$
					\$
					\$
		**************************************		N-14-14-14-14-14-14-14-14-14-14-14-14-14-	Ψ
		of all of your entries from Part 5, in			\$ 0.00
for Part	t 5. Write that	number here		→	
Part 6:				erty You Own or Have an Interest I	n.
	ii you owii o	have an interest in farmland, list	tin Part 1.		
e Do vou	own or have	ny legal or equitable interest in ar	v form or commercia	al fishing valated meanwhy?	
	Go to Part 7.	ny legal of equitable interest in al	y larms or commercia	ar institute related property?	
	Go to Fait 7.				
					Current value of the
					Current value of the portion you own?
					Do not deduct secured claims
7. Farm a	nimale				or exemptions.
		oultry, farm-raised fish			
✓ No	LIVOSIOUN,	vamj, rami idiocu non			
	.		· · · · · · · · · · · · · · · · · · ·		~~
— 168	,				**************************************
					\$
		ereren von een de een voors ja de een de stande voor de stande en gebeure de stande de stande de de een de stande oorde op	enforcement en a version en	3.1000094119118111181111111111111111111111	······································

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Document

OSHANA

Debtor 1	JIM First Name Middle Name Last Name	DSHANA	C	Case number (if known)		
	I as there made ratio (as halle					
	either growing or harvested					
☑ No	Give specific					
infor	mation				\$	200
	d fishing equipment, implements, machinery, fixtu	ures, and tool	ls of trade		8	
☑ No □ Yes		***************************************				
03.					\$	
50. Farm an	d fishing supplies, chemicals, and feed				- The second sec	
☑ No						
☐ Yes.					s	
51 Any farn	n- and commercial fishing-related property you di					
🗹 No		a not aneady	1150			
	Give specific mation				\$	
52. Add the	dollar value of all of your entries from Part 6, incl	uding any en	tries for pages	you have attached		0.00
	6. Write that number here				\$	0.00
Part 7:	Describe All Property You Own or Hav	e an Inter	est in That	You Did Not List Above		
53. Do you	have other property of any kind you did not alread	ly list?				
Examples No	: Season tickets, country club membership					
☐ Yes.	Give specific				\$	
infor	mation				\$	
					\$	
54. Add the	dollar value of all of your entries from Part 7. Writ	e that numbe	er here	→	\$	0.00
				ti mananda kangalanga kangangan ili pendifikanan kenda masah se at kinak kendaman ang at ang ang ang ang ang a	Market and the state of the section	
Part 8:	List the Totals of Each Part of this Fo	rm				
55. Part 1: T	otal real estate, line 2			-	s 1	92,022.00
56. Part 2: T	otal vehicles, line 5	\$	3,393.00			
	otal personal and household items, line 15	\$	2,150.00	•		
	otal financial assets, line 36	*	3,259.00	•		
	otal business-related property, line 45	¢	0.00	•		
	, , ,	Φ	0.00			
	otal farm- and fishing-related property, line 52	\$				
61. Part 7: T	otal other property not listed, line 54	+\$	0.00		pronounce and an annual pro-	delikat i Siri ta dalah dan dikan dikan dan kan maja di Sikah milika milika mengan sama maja mili mili
62. Total pe	rsonal property. Add lines 56 through 61	\$	8,802.00	Copy personal property total 👈	+ \$	8,802.00
		\$		м	hermoneonome	The state of the second
63. Total of	all property on Schedule A/B. Add line 55 + line 62.	·····			\$	200,824.00

JIM

Debtor 1

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Jenioi i	JIM	OSI	HANA					
Debtor 2	First Name	Middle Name		Last Name				
Spouse, if filing)	First Name	Middle Name		Last Name				
Jnited States Ba	ankruptcy Court for th	ne: Northern Distri	ct of Illinois					
Case number _								Check if this is a
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,							á	mended filing
official E	orm 106C							
			4 1					
cnedi	ule C: T	he Prop	perty	You	Claim as Exe	mpt		04/16
ing the proper	rty you listed on S	chedule A/B: Prop	perty (Official I	Form 106A	gether, both are equally responsit vB) as your source, list the prope dditional Page as necessary. On	rty that yo	ou claim as exem	ot. If more
	case number (if kn		,	,	aumonary ago ao nooccoury. On	ino top of	any additional po	igoo, wiite
					mount of the exemption you cl			
					fair market value of the proper health aids, rights to receive c			
					claim an exemption of 100% of			•
				lue of the	property is determined to exce	ed that a	mount, your exe	mption
	d to the annlicah							
	d to the applicab	ie statutory amo	ount.					
	entify the Prop			t				
Part 1: Ide	entify the Prop	erty You Claim	as Exemp			······································		
Part 1: Ide	entify the Prop	erty You Claim	as Exemp	nly, even it	your spouse is filing with you.			
Part 1: Ide	entify the Proportions are claiming state ar	erty You Claim e you claiming?	Check one or	nly, even it ptions. 11	your spouse is filing with you. U.S.C. § 522(b)(3)		,	HANNING IN SALAH AN
Part 1: Ide	entify the Prop	erty You Claim e you claiming?	Check one or	nly, even it ptions. 11				
• Which set ✓ You are	of exemptions are claiming state are claiming federal	erty You Claim e you claiming? Id federal nonban exemptions. 11 U	Check one or kruptcy exemples.C. § 522(b	nly, even il ptions. 11 o)(2)				
Which set You are You are For any pre	of exemptions are claiming state are claiming federal	erty You Claim e you claiming? Ind federal nonbani exemptions. 11 U	Check one or kruptcy exemples.C. § 522(b	nly, even in ptions. 11 i)(2) n as exemue of the	U.S.C. § 522(b)(3)		Specific laws tha	nt allow exemption
Which set You are You are For any pre	of exemptions are claiming state are claiming federal operty you list or	erty You Claim e you claiming? Ind federal nonbani exemptions. 11 U	Check one or kruptcy exemple. S.C. § 522(b	nly, even it ptions. 11 o)(2) n as exemue of the own	U.S.C. § 522(b)(3) pt, fill in the information below.	claim	Specific laws tha	it allow exemption
Which set You are You are For any pre Brief desc Schedule	of exemptions are claiming state are claiming federal operty you list or cription of the property A/B that lists this	erty You Claim e you claiming? Independent of federal nonban exemptions. 11 U an Schedule A/B to perty and line on property	Check one or kruptcy exemply. S.C. § 522(b) hat you claim Current value portion you Copy the value of the control of the contr	nly, even it ptions. 11 ptions. 11 n)(2) n as exem ue of the own lue from	U.S.C. § 522(b)(3) pt, fill in the information below. Amount of the exemption you o	claim mption.	Specific laws tha	·
Which set You are You are For any pre	of exemptions are claiming state are claiming federal operty you list or cription of the propa/B that lists this	erty You Claim e you claiming? Independent of federal nonban exemptions. 11 U an Schedule A/B to perty and line on property	Check one or kruptcy exemptors, \$ 522(b) that you claim Current value portion you Copy the value Schedule A/A	nly, even it ptions. 11 ptions. 11 n)(2) n as exem ue of the own lue from	U.S.C. § 522(b)(3) pt, fill in the information below. Amount of the exemption you of the check only one box for each execution.	claim mption. up to		·
Which set You are You are For any pre Brief desc Schedule Brief description Line from	of exemptions are claiming state are claiming federal operty you list or cription of the propagate that lists this are 695 Baxt	erty You Claim e you claiming? Ind federal nonban exemptions. 11 U in Schedule A/B to perty and line on property er Lane	Check one or kruptcy exemptors, \$ 522(b) that you claim Current value portion you Copy the value Schedule A/A	nly, even it ptions. 11 ptions. 11 ptions as exem ue of the own lue from B	U.S.C. § 522(b)(3) pt, fill in the information below. Amount of the exemption you of the confly one box for each exemption. ✓ \$ 15,000.00 □ 100% of fair market value, any applicable statutory lime.	claim mption. up to it		2-901
Which set You are You are For any pre Brief description Line from Schedule Brief	entify the Proportions are claiming state are claiming federal coperty you list or cription of the propa/B that lists this 695 Baxt 4/B: 1.1 Mitsubish 3 3	erty You Claim e you claiming? Ind federal nonban exemptions. 11 U in Schedule A/B to perty and line on property er Lane	Check one or kruptcy exemply. S.C. § 522(b) hat you claim Current value portion you Copy the value A/o \$ 192,022	nly, even it ptions. 11 ptions. 11 ptions as exem ue of the own lue from B	U.S.C. § 522(b)(3) pt, fill in the information below. Amount of the exemption you of the confly one box for each exemption and the confly of fair market value, any applicable statutory limits.	claim mption. up to it	735 ILCS 5/12	2-901
Which set You are You are For any pro Brief desc Schedule Brief description Line from Schedule Brief description Line from	of exemptions are claiming state are claiming federal coperty you list or cription of the propa/B that lists this comparts the comparts of the propa/B that lists this comparts the comparts of the proparts o	erty You Claim e you claiming? Ind federal nonban exemptions. 11 U in Schedule A/B to perty and line on property er Lane	Check one or kruptcy exemply. S.C. § 522(b) hat you claim Current value portion you Copy the value A/o \$ 192,022	nly, even in ptions. 11 ptions. 11 ptions. 11 ptions as exemule of the lown lue from 18 ptions 2.00	U.S.C. § 522(b)(3) pt, fill in the information below. Amount of the exemption you of the confly one box for each exemption. I 15,000.00 100% of fair market value, any applicable statutory lime.	claim mption. up to it up to iit	735 ILCS 5/12	2-901 2-1001(c)

☐ No☐ Yes

☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

Debtor 1

JIM First Name

OSHANA

Case number (if known)

Part 2:

Additional Page

	on of the property and line /B that lists this property		nt value of the n you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the Schedu	ne value from ule A/B	Check only one box for each exemption	
Brief description:	Goods/Furnishings	\$	1,500.00	<u> </u>	735 ILCS 5/12-1001(b)
Line from Schedule A/B:	<u>6</u>			100% of fair market value, up to any applicable statutory limit	
Brief description:	Television	\$	250.00	□ s	735 ILCS 5/12-1001(b)
Line from Schedule A/B:	7			100% of fair market value, up to any applicable statutory limit	
Brief description:	Local 731 Pension	\$	1,209.00		735 ILCS 5/12-1006
Line from Schedule A/B:	21			✓ 100% of fair market value, up to any applicable statutory limit	
Brief description:	Necessary clothing	\$	400.00	<u> </u>	735 ILCS 5/12-1001(a)
Line from Schedule A/B:	11			100% of fair market value, up to any applicable statutory limit	
Brief description:	Illinois Tax Refund	\$	750.00		735 ILCS 5/12-1001(b)
Line from Schedule A/B:	28			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$		□ s	
Line from Schedule A/B;				☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$		<u> </u>	
Line from Schedule A/B:				☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	Marka from the same of the sam	- \$	
Line from Schedule A/B:				☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	Market Control of the	\$		<u> </u>	
Line from Schedule A/B:				☐ 100% of fair market value, up to any applicable statutory limit	***************************************
Brief description:		\$	· · · · · · · · · · · · · · · · · · ·	<u> </u>	
Line from Schedule A/B:				☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	***************************************	\$			
Line from Schedule A/B:				☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$		<u> </u>	
Line from Schedule A/B:				☐ 100% of fair market value, up to any applicable statutory limit	

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Debtor 1	JIM		OSHANA
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States E	Bankruptcy Court fo	or the: Northern District of II	linois
Case number			

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

☐ Check if this is an amended filing

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

1.	Do any credito	rs have claims	s secured by	your property?
٠.	Do any orcano	o ilave cialiti	o occureu ny	your property

- No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
- Yes. Fill in all of the information below.

for each claim. If more than one creditor h	nore than one secured claim, list the creditor separately as a particular claim, list the other creditors in Part 2. nabetical order according to the creditor's name.	Am Do	lumn A count of claim not deduct the ue of collateral.	Va	umn B lue of collateral it supports this im	Column C Unsecured portion If any
HomeBridge Financial Services	Describe the property that secures the claim:	\$	198,717.00	\$_	192,022.00	_{\$_} 6,695.00
Creditor's Name P.O. Box 100051 Number Street	695 Baxter Lane, Hoffman Estates, IL					
	As of the date you file, the claim is: Check all that apply. Contingent					
Kennesaw GA 30156	Unliquidated Disputed					
Who owes the debt? Check one.	Nature of lien. Check all that apply.					
Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a	An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset)					
community debt Date debt was incurred	Last 4 digits of account number 9 1 9 1	***********************		inelia (medico con esta esta esta esta esta esta esta esta	***************************************	OP-07-Non-Non-Non-Non-Non-Non-Non-Non-Non-Non
OneMain Consumer Loan, Inc.	Describe the property that secures the claim:	\$	7,800.94	\$	1,000.00	§ 6,800.9
P.O. Box 64 Number Street	2000 VW Cabrio Automobile.					
Evansville IN 47701 City State ZIP Code	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated					
Who owes the debt? Check one.	☐ Disputed					
Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt	Nature of Ilen. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset)	_				
Date debt was incurred	Last 4 digits of account number 9 1 9 1					

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Debtor 1 JIM First Name Middle Name	OSHANA Case nur	nber (if known)		
Additional Page Part 1: After listing any entries on this by 2.4, and so forth.	page, number them beginning with 2.3, followed	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
Toyota Financial Services Creditor's Name	Describe the property that secures the claim:	\$3,600.00	\$14,353.00 <u>{</u>	0.00
P.O. Box 4102 Number Street	_ 2013 Lexus IS 250	Province management and		
Carol Stream IL 60197 City State ZIP Code	 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed 			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only Debtor 2 only	 An agreement you made (such as mortgage or secured car loan) 			
Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt	Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset) Vehicle Lease	-		
Date debt was incurred	Last 4 digits of account number			
Creditor's Name	Describe the property that secures the claim:	\$	\$	B
		· paradox minero		
Number Street	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated			
City State ZIP Code	☐ Disputed			
Who owes the debt? Check one. Debtor 1 only	Nature of lien. Check all that apply.			
Debtor 2 only	 An agreement you made (such as mortgage or secured car loan) 			
Debtor 1 and Debtor 2 only At least one of the debtors and another	☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit			
Check if this claim relates to a community debt	Other (including a right to offset)	-		
Date debt was incurred	Last 4 digits of account number			
Creditor's Name	_ Describe the property that secures the claim:	\$	\$	Separate sport and reservoir and service a
	_			
Number Street		- Harmonistana		
No. of the state o	 As of the date you file, the claim is: Check all that apply. Contingent 			
City State ZIP Code	Unliquidated Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only Debtor 2 only	An agreement you made (such as mortgage or secured car loan)			
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	☐ Judgment lien from a lawsuit☐ Other (including a right to offset)			
Check if this claim relates to a community debt				
Date debt was incurred	Last 4 digits of account number		_	
Add the dollar value of your entrice	es in Column A on this page. Write that number here:	\$3,600.00		
If this is the last page of your form	n, add the dollar value totals from all pages.	s 210,117.94		

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JIM OSHANA Debtor 1 Case number (if known) Part 2: List Others to Be Notified for a Debt That You Already Listed Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page. On which line in Part 1 did you enter the creditor? 2.1 PennyMac Loan Services, LLC Name Last 4 digits of account number 4 4 7 5 P.O. Box 30597 Number Street Los Angeles CA 90030 State ZIP Code On which line in Part 1 did you enter the creditor? 2.1 PennyMac Loan Services, LLC Last 4 digits of account number 4 4 7 5 Name P.O. Box 514387 Number Street Los Angeles CA 90051 City State ZIP Code On which line in Part 1 did you enter the creditor? 2.2 OneMain Financial Name Last 4 digits of account number 9 1 9 1 Golf Point Plaza Number Street 309 W. Golf Road, Suite 3 IL Schaumburg 60195 City State ZIP Code On which line in Part 1 did you enter the creditor? 2.2 OneMain Name Last 4 digits of account number 9 1 9 1 P.O. Box 790368 Number St. Louis MO 63179 City State ZIP Code On which line in Part 1 did you enter the creditor? 2.2 OneMain Last 4 digits of account number 9 1 9 1 Name 1338 N. Roselle Road Number Street Schaumburg IL 60195 City State ZIP Code On which line in Part 1 did you enter the creditor? Name Last 4 digits of account number ____ ___

Number

City

Street

ZIP Code

State

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Fill in this in	formation to id	entify your case:	
Debtor 1	JIM		OSHANA
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States F	Bankruptcy Court f	or the: Northern District of Illi	inois
Case number			
(If known)			Page-Management

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Pa	rt 1: List All of Your PRIORITY Unsecur	ed Claims			
1.	Do any creditors have priority unsecured claim:	s against you?			
1	No. Go to Part 2.	•			
	☐ Yes.				
2.	List all of your priority unsecured claims. If a creach claim listed, identify what type of claim it is. If nonpriority amounts. As much as possible, list the cunsecured claims, fill out the Continuation Page of	reditor has more than one priority unsecured claim, list the a claim has both priority and nonpriority amounts, list the claims in alphabetical order according to the creditor's none creditor holds a particular claim.	at claim here ame. If you h	and show bo	oth priority and
	(For an explanation of each type of claim, see the i	nstructions for this form in the instruction bookiet.)	oralday.compete	:66e:es:: <u>##\$#######</u>	Private in Consultation on a consultation of
Supplied St. Park			Total clain		
10.4]			amoun	amount
2.1		Last 4 digits of account number	\$	\$	\$
1	Priority Creditor's Name				
		When was the debt incurred?			
1	Number Street				
		As of the date you file, the claim is: Check all that apply	! .		
	City State ZIP Code	☐ Contingent			
	,	☐ Unliquidated			
	Who incurred the debt? Check one. Debtor 1 only	☐ Disputed			
	Debtor 2 only	Tune of PRIORITY and a served alains			
	Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:			
	At least one of the debtors and another	Domestic support obligations			
	☐ Check if this claim is for a community debt	Taxes and certain other debts you owe the government			
	·	Claims for death or personal injury while you were			
	Is the claim subject to offset?	intoxicated Other, Specify			
	☐ No ☐ Yes	Other, Specify	•		
	To the control of the		Harianan ariko kolikolanda ossalosk kolikolikolik	orkealvilaiteste säitenalvijes, keivyteelitaanesti	SPP OR TO BE SELECT STORY TO BE SELECT STORY SELECT STORY SELECT STORY SELECTION SELEC
2.2		Last 4 digits of account number	\$	\$	S
	Priority Creditor's Name	When was the debt incurred?		· · · · · · · · · · · · · · · · · · ·	
	Number Street				
a production of the control of the c	Hamber Street	As of the date you file, the claim is: Check all that apply	١.		
		Contingent			
	City State ZIP Code	Unliquidated			
	Who incurred the debt? Check one.	☐ Disputed			
	Debtor 1 only				
	Debtor 2 only	Type of PRIORITY unsecured claim:			
	Debtor 1 and Debtor 2 only	☐ Domestic support obligations			
	☐ At least one of the debtors and another	Taxes and certain other debts you owe the government			
	☐ Check if this claim is for a community debt	 Claims for death or personal injury while you were intoxicated 			
	Is the claim subject to offset?	Other. Specify			
	□ No				
5	Yes				

Document

Your PRIORITY Unsecured Claims — Continuation Page

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Debtor 1

Part 1:

JIM First Name

OSHANA

Case number (if known)

r listing any entries on this page, number then	n beginning with 2.3, followed by 2.4, and so forth.	Total claim	Priority amount	Nonpriority amount
Priority Creditor's Name	Last 4 digits of account number	\$	\$	\$
The state of the s	When was the debt incurred?			
Number Street	when was the debt incurred?			
100.00	As of the date you file, the claim is: Check all that apply.			
	☐ Contingent			
City State ZIP Code	Unliquidated			
,	Disputed			
Who incurred the debt? Check one.	•			
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only	Domestic support obligations			
Debtor 1 and Debtor 2 only	Taxes and certain other debts you owe the government			
At least one of the debtors and another	☐ Claims for death or personal injury while you were			
☐ Check if this claim is for a community debt	intoxicated Other. Specify			
Is the claim subject to offset?				
□ No				
☐ Yes				
	Last 4 digits of account number	\$	\$	\$
Priority Creditor's Name				
Number Street	When was the debt incurred?			
	As of the date you file, the claim is: Check all that apply.			
	_			
Cit. TIDO	Contingent			
City State ZIP Code	☐ Unliquidated ☐ Disputed			
Who incurred the debt? Check one.	Lisputed			
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only				
☐ Debtor 1 and Debtor 2 only	☐ Domestic support obligations ☐ Taxes and certain other debts you owe the government			
At least one of the debtors and another	Claims for death or personal injury while you were			
☐ Check if this claim is for a community debt	intoxicated			
— Shook if this claim is for a community dest	Other. Specify			
Is the claim subject to offset?				
□ No				
Yes				
				encoging gang gang kanang sanah melihin kebahan baha disebuah te-
Priority Creditor's Name	Last 4 digits of account number	\$	\$	\$
, the state of the	When was the debt incurred?			
Number Street	when was the debt incurred?			
	As of the date you file, the claim is: Check all that apply.			
	☐ Contingent			
City State ZIP Code	Unliquidated			
	☐ Disputed			
Who incurred the debt? Check one.	•			
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only	Domestic support obligations			
Debtor 1 and Debtor 2 only	Taxes and certain other debts you owe the government			
At least one of the debtors and another	Claims for death or personal injury while you were			
☐ Check if this claim is for a community debt	intoxicated Other. Specify		Participation of the Participation of Charles (Participation Charles of Charl	zaszkór a rikurazkórasznoncikosyr a jennek ek (ö. 110 az esz esz es
Is the claim subject to offset?				
□ No				
Yes				

Case 18-06012 Doc 1

Document

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Debtor 1

	11	8.4	
٠	H	IVI	
•	٠,		

Debioi	First Name Middle Name Last N	ame	Case number (if known)	
Part	2: List All of Your NONPRIORITY U	nsecured Claim	s	
4	No. You have nothing to report in this part. S	Submit this form to	the court with your other schedules.	
no inc	npriority unsecured claim, list the creditor ser	parately for each cla	al order of the creditor who holds each claim. If a creditor has aim. For each claim listed, identify what type of claim it is. Do not n, list the other creditors in Part 3.If you have more than three no	list claims already
				Total claim
4.1 A	Advance Physical Med. Associates, Nonpriority Creditor's Name	SC	Last 4 digits of account number 1 5 8 4	s 1,833.13
4	190 Lake Street, Suite 105	***************************************	When was the debt incurred?	· · · · · · · · · · · · · · · · · · ·
F	Aumber Street Roselle IL City State	60172 ZIP Code	As of the date you file, the claim is: Check all that apply.	
Ç	Nho incurred the debt? Check one. ☑ Debtor 1 only ☐ Debtor 2 only		☐ Contingent ☐ Unliquidated ☐ Disputed	
	Debtor 1 and Debtor 2 only		Type of NONPRIORITY unsecured claim:	
Ĺ	At least one of the debtors and another		Student loans	
C	Check if this claim is for a community deb	t	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Ç	s the claim subject to offset? ☑ No ☑ Yes		Debts to pension or profit-sharing plans, and other similar debts Other. Specify Medical services.	
	Alexian Brothers Medical Center Nonpriority Creditor's Name P.O. Box 21219		Last 4 digits of account number 9 1 9 1 When was the debt incurred?	\$7,638.95
	lumber Street Chicago IL	60673	As of the date you file, the claim is: Check all that apply.	
٧	State Who incurred the debt? Check one. Debtor 1 only	ZIP Code	Contingent Unliquidated Disputed	
C	Debtor 2 only		·	
	☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another		Type of NONPRIORITY unsecured claim: Student loans	
	☐ Check if this claim is for a community deb	t	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	s the claim subject to offset? ☑ No ☑ Yes		Debts to pension or profit-sharing plans, and other similar debts Other. Specify Medical services.	
	Amita Health	erent kingkan artinion kinet en ingen erik dit i door tok varin sytool kally and vision en de en jook	Last 4 digits of account number _2 _6 _8 _2	s 136.57
	Nonpriority Creditor's Name 22589 Network Place		When was the debt incurred?	\$ 130.57

₩ No

☐ Yes

Number

Chicago

☑ Debtor 1 only

Debtor 2 only

Street

Who incurred the debt? Check one.

At least one of the debtors and another

lacksquare Check if this claim is for a community debt

Debtor 1 and Debtor 2 only

Is the claim subject to offset?

IL

State

60673

ZIP Code

☐ Contingent

☐ Unliquidated

☐ Student loans

Disputed

As of the date you file, the claim is: Check all that apply.

 $f \Box$ Obligations arising out of a separation agreement or divorce

 $f \Box$ Debts to pension or profit-sharing plans, and other similar debts

Type of NONPRIORITY unsecured claim:

that you did not report as priority claims

Other. Specify Medical services.

Document OSHANA

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Debtor 1

01111

Middle Name

Last Name

Case number (if known)_

Part 2: Your NONPRIORITY Unsecured Claims — Continuation Page

er listing any entries on this	page, number ther	n beginning with	1 4.4, followed by 4.5, and so forth.	Tota	ıl claim
Amita Health Nonpriority Creditor's Name			Last 4 digits of account number 8 1 6 5	\$	24.6
22589 Network Place			When was the debt incurred?		
Number Street Chicago	L	60673	As of the date you file, the claim is: Check all that apply.		
City	State	ZIP Code	Contingent		
Who incurred the debt? Che	ck one.		☐ Unliquidated☐ Disputed		
Debtor 1 only			Disputed		
Debtor 2 only			Type of NONPRIORITY unsecured claim:		
Debtor 1 and Debtor 2 only At least one of the debtors a			☐ Student loans		
			Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
☐ Check if this claim is for	a community debt		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts		
Is the claim subject to offset	1?		Other Specify Medical services.		
☑ No ☐ Yes					
Amita Health	n nggan tanàna na na kaominina dia kaominina dia kaominina dia kaominina dia kaominina dia kaominina dia kaomi	egymedia rosa sesse autorizada sesse de Solvinia e esta esta esta esta esta esta esta e	Last 4 digits of account number 2 4 0 2	\$	45.4
Nonpriority Creditor's Name 22589 Network Place			When was the debt incurred?		
Number Street			As of the date you file, the claim is: Check all that apply.		
Chicago City	IL State	60673 ZIP Code			
Oity	State	ZIP Code	☐ Contingent☐ Unliquidated		
Who incurred the debt? Che	ck one.		☐ Disputed		
Debtor 1 only					
Debtor 2 only Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:		
At least one of the debtors a	nd another		☐ Student loans		
			Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
☐ Check if this claim is for	-		Debts to pension or profit-sharing plans, and other similar debts		
Is the claim subject to offset ✓ No ☐ Yes	! ?		☑ Other. Specify Medical services.		
Bone & Joint Center, F	P.C.	Met Charles (Met Met Andrée Andrée) and America commenté en compres en partie en l'	Last 4 digits of account number 9 0 7 2	\$ <u>3,</u>	340.0
Nonpriority Creditor's Name			When was the debt incurred?		
4211 N. Cicero, Suite 2	ZUU		_		
Chicago	IL	60641	As of the date you file, the claim is: Check all that apply.		
City	State	ZIP Code	Contingent		
Who incurred the debt? Che	ck one.		☐ Unliquidated ☐ Disputed		
Debtor 1 only			- Nisharan		
Debtor 2 only			Type of NONPRIORITY unsecured claim:		
Debtor 1 and Debtor 2 only			☐ Student loans		
At least one of the debtors a			Obligations arising out of a separation agreement or divorce that		
☐ Check if this claim is for	a community debt		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts		
Is the claim subject to offset ☑ No ☐ Yes	1?		Other. Specify Medical services.		

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JIM	
First Name	

Middle Name

Last Name

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4.	4

Debtor 1

Your NONPRIORITY Unsecured Claims — Continuation Page

er listing any entries on this pa	age, number them begi	nning with 4.4, followed by 4.5, and so forth.	Total clai
Bone & Joint Center, PC	,	Last 4 digits of account number 8 7 0 4	_{\$} 515.
Nonpriority Creditor's Name 4211 N. Cicero, Suite 20	00	When was the debt incurred? 07/14/2007	
Number Street Chicago	IL 600	As of the date you file, the claim is: Check all that apply.	
City	State ZIP Co		
140 - 1		Unliquidated	
Who incurred the debt? Check	one.	☐ Disputed	
Debtor 1 only Debtor 2 only		Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only			
At least one of the debtors and	another	☐ Student loans☐ Obligations arising out of a separation agreement or divorce that	
☐ Check if this claim is for a	community debt	you did not report as priority claims	
Is the claim subject to offset?	, uou.	Debts to pension or profit-sharing plans, and other similar debts	
✓ No		Other. Specify Medical services.	
Yes			
Bruce Kolton, M.D.	4444 Marija Palakan (Palakan Series errore er den 152 Marija Para errore errore errore errore errore errore er	Last 4 digits of account number 8 1 9	\$ <u>118</u>
Nonpriority Creditor's Name		When was the debt incurred? 08/11/2016	
21421 Network Place Number Street		Tribit trac tric dost mountain	
Chicago	IL 606	As of the date you file, the claim is: Check all that apply.	
City	State ZIP Co	- · · ·	
Who incurred the debts of	•	Unliquidated	
Who incurred the debt? Check	one.	☐ Disputed	
Debtor 1 only Debtor 2 only		Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only			
At least one of the debtors and	another	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that	
☐ Check if this claim is for a	community deht	you did not report as priority claims	
Is the claim subject to offset?	oominamity west	Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset? ✓ No		✓ Other. Specify Medical services.	
Yes			
Capital One Bank, N.A.	t the mention of the state of t	Last 4 digits of account number 9 0 6 6	_{\$1,386}
Nonpriority Creditor's Name			
P.O. Box 6492		When was the debt incurred?	
Number Street Carol Stream	IL 60 ⁻	As of the date you file, the claim is: Check all that apply.	
City	IL 60°	97	
•		Unliquidated	
Who incurred the debt? Check	one.	☐ Disputed	
Debtor 1 only			
Debtor 2 only Debtor 1 and Debtor 2 only		Type of NONPRIORITY unsecured claim:	
At least one of the debtors and	another	Student loans	
		Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
☐ Check if this claim is for a	community debt	Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?		Other. Specify Credit card debt.	
₩ No			
Yes			

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Debtor 1	First Name	Middle Name	Last Name	Case number (if known)		
Part 2:	Your NONPRIORITY Unsecured Claims — Conti		ecured Claims — Continuat	ion Page		
After lieti	na any antrio	e on this name	number them beginning with A	I fallenned by A.P. and an E. All		

Afte	er listing any entries on this page, nu	imber the	m beginning with 4	.4, followed by 4.5, and so forth.	То	tal claim
.10	Capital One, N.A. Nonpriority Creditor's Name			Last 4 digits of account number 2 6 9 8	\$	385.57
	P.O. Box 71087			When was the debt incurred?		
	Number Street Charlotte	NC	28272	As of the date you file, the claim is: Check all that apply.		
	Who incurred the debt? Check one. ✓ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a commuls the claim subject to offset? ✓ No □ Yes		ZIP Code	 □ Contingent □ Unliquidated □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify Credit card debt. 		
.11	Capital One Retail Services Nonpriority Creditor's Name	Distance de Se el bosidad de reconçes escace	THE PLANT OF THE PLANT CONTROL OF THE PLANT OF THE PLANT CONTROL OF THE PLANT OF THE PLANT CONTROL OF THE PLANT CO	Last 4 digits of account number 5 2 2 6 When was the debt incurred?	\$	535.31
	P.O. Box 71106 Number Street					
	Charlotte	NC State	28272 ZIP Code	As of the date you file, the claim is: Check all that apply. Contingent		
	Who incurred the debt? Check one. ✓ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a commuls the claim subject to offset? ✓ No □ Yes		energiaansi kantaa kant	 Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify Credit card debt. 		
.12	Credit One Bank	est de la companience de la co	mentana dia 40-46 kanjara dia 30-60 kanjara kanjara (1 dia 22-24-kanjara) kanjaran penata (1	Last 4 digits of account number 7 1 9 2	\$	227.55
	Nonpriority Creditor's Name P.O. Box 60500			When was the debt incurred?		
	Number Street City of Industry City	CA State	91716 ZIP Code	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated		
	Who incurred the debt? Check one. ✓ Debtor 1 only			☐ Disputed		
	Debtor 2 only			Type of NONPRIORITY unsecured claim:		
	Debtor 1 and Debtor 2 only At least one of the debtors and another			Student loans		
	☐ Check if this claim is for a commu			 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 		
	Is the claim subject to offset? ✓ No ☐ Yes	inty debt		☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify Credit card debt.		

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Debtor 1

Middle Name

OSHAÑĂ

Case number (if known)

Part 2: Your NONPRIORITY Unsecured Claims — Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. Total claim .13 Last 4 digits of account number 2 2 1 0 Discover s 7,611.67 Nonpriority Creditor's Name When was the debt incurred? P.O. Box 6103 Number Street As of the date you file, the claim is: Check all that apply. Carol Stream 11 60197 State 7IP Code Contingent Unliquidated Who incurred the debt? Check one. Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only ☐ Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? other. Specify Credit card debt. M No ☐ Yes .14 Last 4 digits of account number 1 6 8 1 990.00 Edward Atkins, M.D. Nonpriority Creditor's Name 12/01/2006 When was the debt incurred? 8135 N. Milwaukee Ave. Street As of the date you file, the claim is: Check all that apply. Niles 60714 State ZIP Code ☐ Contingent ☐ Unliquidated Who incurred the debt? Check one. Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only ☐ Student loans At least one of the debtors and another lacksquare Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? ✓ Other Specify Medical services. M No ☐ Yes .15 663.54 Last 4 digits of account number 4 3 5 4 First Premier Bank Nonpriority Creditor's Name When was the debt incurred? P.O. Box 5529 Street Number As of the date you file, the claim is: Check all that apply. Sioux Falls SD 57117 ZIP Code Contingent Unliquidated Who incurred the debt? Check one. Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only ☐ Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? ✓ Other. Specify Credit card debt. V No ☐ Yes

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Debtor 1

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Part 2:

Your NONPRIORITY Unsecured Claims — Continuation Page

Afte	r listing any entries on this page, num	nber the	m beginning with	n 4.4, followed by 4.5, and so forth.	Total claim
.16	First Premier Bank		PH 1994	Last 4 digits of account number 4 6 7 8	_{\$} 545.69
	Nonpriority Creditor's Name P.O. Box 5529			When was the debt incurred?	a may be designed and the second and
		SD State	57117 ZIP Code	As of the date you file, the claim is: Check all that apply. — Contingent	
	Who incurred the debt? Check one. ✓ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a communils the claim subject to offset? ✓ No	ty debt		Unliquidated □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify Credit card debt.	
.17	Garofalo, Schreiber & Storm, C	htd.		Last 4 digits of account number 1 3 9 9	\$ <u>30,001.0</u>
	55 W. Wacker Drive, 10th Floor	•		When was the debt incurred?	
	Number Street Chicago	IL	60601	As of the date you file, the claim is: Check all that apply.	
	City	State	ZIP Code	☐ Contingent☐ Unliquidated	
	Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a communils the claim subject to offset? No Yes	ty debt		Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify Cook Cty Case. 17 L 1399	-
.18	Kane County Clerk of Court	015-11-14-105-2-1-14-13-14-13-14-13-14-13-14-13-14-13-14-13-14-13-14-13-14-13-14-13-14-13-14-13-14-13-14-13-14		Last 4 digits of account number	\$ 8,000.00
	Nonpriority Creditor's Name 540 S. Randall Road			When was the debt incurred?	
	Number Street St. Charles	IL State	60174 ZIP Code	As of the date you file, the claim is: Check all that apply. Contingent	
	Who incurred the debt? Check one.			☐ Unliquidated ☐ Disputed	
	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another Check if this claim is for a communi	ty debt		 Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts 	
	Is the claim subject to offset? ☑ No □ Yes			☑ Other. Specify <u>Case No. 2009 CF 1166.</u>	37.7

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De	btor	1

JIM

Case number (if known)_

Your NONPRIORITY Unsecured Claims — Continuation Page

fter listing any entries on this	page, number them beginnin	g with 4.4, followed by 4.5, and so forth.	Total claim
G&T Orthopaedics Nonpriority Creditor's Name		Last 4 digits of account number 4 7 6 5	\$_33,030.Q
1200 S. York Road, Su	uite 4190	When was the debt incurred?	
Number Street Elmhurst	IL 60126	As of the date you file, the claim is: Check all that apply.	
City	State ZIP Code	Contingent Unliquidated	
Who incurred the debt? Chec	ck one.	Disputed	
✓ Debtor 1 only ☐ Debtor 2 only		Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only At least one of the debtors ar	- d th	☐ Student loans	
☐ Check if this claim is for a		 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Is the claim subject to offset	•	Debts to pension or profit-sharing plans, and other similar debts Other, Specify Medical services.	
☑ No □ Yes	•	Other Specify Wedical Services.	
Great Lakes	n melang perang ang ang menang ang ang ang ang ang ang ang ang ang	Last 4 digits of account number 7 2 5 8	\$ <u>30,102.</u> Q
Nonpriority Creditor's Name P.O. Box 7860		When was the debt incurred?	
Number Street		As of the date you file, the claim is: Check all that apply.	
Madison City	WI 53707 State ZIP Code	Contingent	
Who incurred the debt? Chec	ık ana	☐ Unliquidated	
Debtor 1 only	ck one.	☐ Disputed	
Debtor 2 only		Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only At least one of the debtors ar	nd another	☑ Student loans	
☐ Check if this claim is for a		Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
Is the claim subject to offset	•	Debts to pension or profit-sharing plans, and other similar debts	
✓ No ☐ Yes	•	Other. Specify	
Illinois Medical Group	tta 1994 (tillsvillest 1994 (tilsstation) 1992 vir som ut sträkspräden konstruer av den en sträksjämister en besung av	Last 4 digits of account number 9 0 7 2	\$_2,300.0
Nonpriority Creditor's Name		When was the debt incurred?	
4211 N. Cicero Number Street			
Chicago City	IL 60641	As of the date you file, the claim is: Check all that apply.	
City	State ZIP Code	☐ Contingent ☐ Unliquidated	
Who incurred the debt? Chec	k one.	Disputed	
Debtor 1 only Debtor 2 only		Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only		Student loans	
At least one of the debtors ar	nd another	Obligations arising out of a separation agreement or divorce that	
☐ Check if this claim is for a	a community debt	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset' ☑ No ☐ Yes	?	Other. Specify Medical services.	

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Debtor 1

JIM		

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Case number (if known)_

Part 2:

Your NONPRIORITY Unsecured Claims — Continuation Page

Afte	er listing any entries on this page, num	nber then	n beginning with	4.4, followed by 4.5, and so forth.	Total claim	
.22	LabPro, Inc. Nonpriority Creditor's Name P.O. Box 5988, Dept. 20-5019	·		Last 4 digits of account number MANY When was the debt incurred?	\$ <u>600.00</u>	
	Number Street					
		IL	60197	As of the date you file, the claim is: Check all that apply.	· Control of the cont	
	City State ZIP Code Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt		ZIP Code	Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts		
	Is the claim subject to offset? ☑ No ☐ Yes	2015-2015-2016-2016-2016-2016-2016-2016-2016-2016	ne sikolikuminingari kanggi manakanggi manakanggi sa kanggi kanggi kanggi kanggi kang kang kang kang kang kang	Other. Specify Medical services.		
23	Lowe's / Synchrony Bank Nonpriority Creditor's Name			Last 4 digits of account number 9 9 9 7	\$ <u>2,031.70</u>	
	P.O. Box 530914			When was the debt incurred?		
	Number Street Atlanta	GA	30353	As of the date you file, the claim is: Check all that apply.		
		State	ZIP Code	Contingent		
	Who incurred the debt? Check one. ✓ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another			 Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that 		
	☐ Check if this claim is for a communit Is the claim subject to offset? ☑ No ☐ Yes	ty debt		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify <u>Credit card debt.</u>		
24	Molecular Imaging			Last 4 digits of account number 2 4 2 4	\$ <u>118.48</u>	
	Nonpriority Creditor's Name 28489 Network Place Number Street			When was the debt incurred? $08/12/2017$		
	Chicago	IL State	60673 ZIP Code	As of the date you file, the claim is: Check all that apply. Contingent	11 P	
	Who incurred the debt? Check one. ✓ Debtor 1 only			☐ Unliquidated ☐ Disputed		
	Debtor 2 only			Type of NONPRIORITY unsecured claim:		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another			Student loans		
	☐ Check if this claim is for a communit	4 da l-4		 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 		
	Is the claim subject to offset? No Yes	iy debt		☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify Medical expenses.	* Obs. * Ill state the second of the	

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Debtor 1

Case number (if known)_

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Your NONPRIORITY Unsecured Claims — Continuation Page

Afte	r listing any entries on this page, nu	ımber the	m beginning with	4.4, followed by 4.5, and so forth.	То	tal claim
.25	NWHC Hoffman Estates Offic	e		Last 4 digits of account number 9 1 5 1	\$	475.00
AND THE RELIEF TO SERVICE STATES AND THE SERV	Nonpriority Creditor's Name 2360 Hassell Road, Suite F			When was the debt incurred? 11/08/2007		
	Number Street Hoffman Estates	IL	60169	 As of the date you file, the claim is: Check all that apply. 		
	Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a commuls the claim subject to offset? No Yes	State	ZIP Code	 □ Contingent □ Unliquidated □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify Medical services. 		
.26	Physicians Immediate Care - Nonpriority Creditor's Name	Chicago	nder (den kaltingska der de krieger den kaltingska de krieger (den krieger (den krieger (de krieger (de krieger	Last 4 digits of account number 2 4 0 2	\$	217.00
	P.O. Box 15473			When was the debt incurred? 11/30/2006		
	Number Street Loves Park	IL	61111	As of the date you file, the claim is: Check all that apply.		
	City	State	ZIP Code	Contingent		The state of the s
	Who incurred the debt? Check one.			☐ Unliquidated☐ Disputed		
	Debtor 1 only			T (NONDRIGHT)		
	Debtor 2 only Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:		
	At least one of the debtors and another			Student loansObligations arising out of a separation agreement or divorce that		
	☐ Check if this claim is for a commu	nity debt		you did not report as priority claims		
	Is the claim subject to offset?			☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify Medical services.		
	☑ No □ Yes					
.27	Robert Demke, MD	обернов бор де стревенти и венений верходи става.	an constituent and a service consistence and an analysis consistence and an analysis consistence and a service	Last 4 digits of account numberOOO_	\$	138.40
	Nonpriority Creditor's Name P.O. Box 488			When was the debt incurred? 03/12/2010		
	Number Street Westmont	IL	60559	As of the date you file, the claim is: Check all that apply.		
	City	State	ZIP Code	Contingent		
	Who incurred the debt? Check one.			Unliquidated		
	Debtor 1 only			☐ Disputed		
	Debtor 2 only			Type of NONPRIORITY unsecured claim:		
	Debtor 1 and Debtor 2 onlyAt least one of the debtors and another			Student loans		
				 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 		
	Check if this claim is for a commu	nity debt		Debts to pension or profit-sharing plans, and other similar debts		
	Is the claim subject to offset? ✓ No ☐ Yes			☑ Other. Specify <u>Medical services.</u>		

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Debtor 1

OSHANA Case number (if known) Middle Name

Part 2: Your NONPRIORITY Unsecured Claims — Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. Total claim .28 Last 4 digits of account number 3 2 9 1 Blatt Hasenmiller Leibsker & Moore, LLC s 51,948.09 Nonpriority Creditor's Name When was the debt incurred? 211 Landmark Drive Number Street As of the date you file, the claim is: Check all that apply. Normal IL 61761 State ZIP Code Contingent Unliquidated Who incurred the debt? Check one, Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only ☐ Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? other. Specify Cook Cty Case. 2000 L 13291 ₩ No ☐ Yes .29 Last 4 digits of account number 2 8 9 A \$ 857.00 Radiological Consultants of Woodstock Nonpriority Creditor's Name When was the debt incurred? 9410 Compubil Drive Street As of the date you file, the claim is: Check all that apply. Orland Park IL 60462 State ZIP Code ☐ Contingent Unliquidated Who incurred the debt? Check one. Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only ☐ Student loans At least one of the debtors and another $oldsymbol{\square}$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? Other. Specify Medical services. ☑ No ☐ Yes .30 \$ 2,000.00 Last 4 digits of account number Sherman Family Healthcare Nonpriority Creditor's Name When was the debt incurred? 2320 Royal Boulevard Number As of the date you file, the claim is: Check all that apply. Elgin 60123 IL ZIP Code ☐ Contingent ☐ Unliquidated Who incurred the debt? Check one. Disputed ☑ Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only ☐ Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? Other. Specify Medical services. ₩ No ☐ Yes

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Debtor 1

JIM

Case number (if known)

List Others to Be Notified About a Debt That You Already Listed Part 3:

er & Moor	e, LLC	Sons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. On which entry in Part 1 or Part 2 did you list the original creditor?		
ite 2200		Line 28 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims		
		Part 2: Creditors with Nonpriority Unsecured Claim		
		Last 4 digits of account number 3 2 9 1		
IL State	ZIP Code	<u> </u>		
eran kerti mindikan kentan kerti en	er i rezinante en e en efetere e en	On which entry in Part 1 or Part 2 did you list the original creditor?		
		Line 19 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims		
		Part 2: Creditors with Nonpriority Unsecured		
ions		Claims		
IL State	60423 ZIP Code	Last 4 digits of account number 4 7 6 5		
3ankruptcy	Dept.	On which entry in Part 1 or Part 2 did you list the original creditor?		
		Line 23 of (Check one): Part 1: Creditors with Priority Unsecured Claims		
		Part 2: Creditors with Nonpriority Unsecured Claims		
FL	32896	Last 4 digits of account number 9 9 9 7		
entertenner under til skar dagsvoc	remente e e en menor en excellente en en simples estat, perço e en en en e	On which entry in Part 1 or Part 2 did you list the original creditor?		
37W777 Route 38, Suite 300		Line 18 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured		
		Claims		
IL	60175	Last 4 digits of account number 1 1 6 6		
MARTINIAN SANAMAN SANA				
torm, Chtd	•	On which entry in Part 1 or Part 2 did you list the original creditor?		
th Flood		Line 18 of (Check one): Part 1: Creditors with Priority Unsecured Claims		
		Part 2: Creditors with Nonpriority Unsecured		
		Claims		
IL State		Last 4 digits of account number 1 1 6 6		
orney		On which entry in Part 1 or Part 2 did you list the original creditor?		
d		Line 18 of (Check one): Part 1: Creditors with Priority Unsecured Claims		
		Part 2: Creditors with Nonpriority Unsecured		
		Claims		
IL State	60174 ZIP Code	Last 4 digits of account number 1 1 6 6		
		On which entry in Part 1 or Part 2 did you list the original creditor?		
		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims		
		Part 2: Creditors with Nonpriority Unsecured		
	IL State State	IL 60603 State ZIP Code ions IL 60423 State ZIP Code Bankruptcy Dept. FL 32896 State ZIP Code torney e 300 IL 60175 State ZIP Code ttorm, Chtd. th Flood IL 60601 State ZIP Code		

Case 18-06012

Doc 1

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Debtor 1

JIM

Case number (if known)

Part 4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

			Total claim	
Total claims	6a. Domestic support obligations	6a.	\$	0.00
from Part 1	6b. Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d.	+ \$	0.00
	6e. Total. Add lines 6a through 6d.	6e.	\$	0.00
			Total claim	
Total claims	6f. Student loans	6f.	\$	30,102.00
from Part 2	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	+ \$	157,714.56
	6j. Total. Add lines 6f through 6i.	6j.	\$	187,816.56

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Debtor	JIM	OSHANA	
	First Name	Middle Name	Last Name
Debtor 2			
Spouse If filing)	First Name	Middle Name	Last Name
United States I Case number (If known)	Bankruptcy Court for	r the: Northern District of II	llinois

Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

1 1							
2.1	Tovota	Toyota Financial Services			2013 Lexus IS 250 Automobile		
1	Name				2010 Lexas to 200 Automobile		
-	P.O. Bo	ox 4102					
No.	Number	Street		······································			
	Carol S	Stream	IL	60197			
	City		State	ZIP Code	 		
2.2	Sealer Server Server reserve a great server	i del tra di la come di conservingua di segui, per presenta e	in to the Section of	etti at til ett ett til til ett til ett ett ett ett ett ett ett ett ett et			
2.2		***************************************	····				
	Name						
	Number	Street	·····				
	Hamber	Ollect					
	City		State	ZIP Code			
2.3	anan milana mangana	ikki kirki terbahkira Kolongina di senatur aktor dari digangsorriar	a i zo-euz alter-tas a su-sauda da 1963b Antonabeles diseaso.	necessing sandicarea policican properti properti primentanta properti e escolo sandoro el el citadoro.	+ (24.69% + 24.5% +		
2.0	******	***************************************					
	Name						
	Number	Street		***************************************	And the state of t		
	Number	Street					
	City		State	ZIP Code			
2.4	normania (no ormania)	till til för att milli till at till til till til til sennen gid seg til agsende se	(mm) i vezinagez erom la ome promiléra (ol part) l'émorenyo y	on non material superioris superioris superioris superioris superioris de superioris de superioris	THE PROPERTY OF THE SECOND SEC		
2.7		····					
	Name						
arrange and a	Number	Street					
	Munipel	Succi					
	City		State	ZIP Code	····		
2.5		morphise and our major great policy of the physiological processions.		nes) es proposition plantament a caste parametra a caste cartes a l'homonoment dels minimentes de servició dels minimentes de servició de la minimente de la caste			
2.5							
	Name						
	Number	Ct					
1	Number	Street			•		
1							

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Fill in this information to identify your case:							
Debtor 1	JIM		OSHANA				
]	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse, if filing)	First Name	Middle Name	Last Name				
United States E	Bankruptcy Court f	or the: Northern District of Illinois					
Case number (lf known)	***************************************		-				

☐ Check if this is an amended filing

Official Form 106H

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

				et manutet debugte mitjekt ja noma vennamman mannigt si stedes followers of formation of formation of the section of the secti
	Do you have any codebtors? ☑ No ☑ Yes	? (If you are filing a joint case, do r	not list either spouse	as a codebtor.)
2.	Within the last 8 years, have Arizona, California, Idaho, Lou	you lived in a community propulsiana, Nevada, New Mexico, Pu	erty state or territory erto Rico, Texas, Was	y? (Community property states and territories include shington, and Wisconsin.)
	☑ No. Go to line 3.			
	Yes. Did your spouse, forr	ner spouse, or legal equivalent liv	e with you at the time	?
	☐ No			
	Yes. In which commun	nity state or territory did you live?		Fill in the name and current address of that person.
	Name of your appuse, forme			•••
	name of your spouse, forme	r spouse, or legal equivalent		
	Number Street			
	City	State	ZIP Code	_
	In Column 4. link all afterness	andahana Barasaktariatan		
J.	shown in line 2 again as a c	odebtors. Do not include your t	spouse as a codebto	or if your spouse is filing with you. List the person er. Make sure you have listed the creditor on
	Schedule D (Official Form 1	06D). Schedule E/F (Official For	guarantor or cosign m 106E/F), or Sched	fule G (Official Form 106G). Use Schedule D,
	Schedule E/F, or Schedule (G to fill out Column 2.	,, ,, ,,	tare a familiar, anni 1000), dod astrough b,
	Column 1: Your codebtor			
	Column 1. Your codeptor			Column 2: The creditor to whom you owe the debt
				Check all schedules that apply:
3.1				_
	Name			Goriedule D, lille
				Schedule E/F, line
	Number Street			☐ Schedule G, line
	City	State	ZIP Code	MANAGEMENT AND ASSESSMENT AND ASSESSMENT ASS
3.2				
	Name			Schedule D, line
				☐ Schedule E/F, line
	Number Street			☐ Schedule G, line
	City	State	ZIP Code	
3.3	entention of the contract of the second of t	Oddo	217 0000	ия с то си на общивания на прости на выправния выправления на принципа
0.0	Name			Schedule D, line
	Hailia			Schedule E/F, line
	Number Street			Schedule G, line
		······································		
	City	State	ZIP Code	e karean kutan paria manduni samundan manan manangan karandan karandan manan manan manan manan manan dagar (sa

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Fill in this in	formation to identify	your case:					
Debtor 1	JIM		OSHANA				
Debtor 2	First Name	Middle Name	Last Name				
(Spouse, if filing)	First Name	Middle Name	Last Name				
United States I	Bankruptcy Court for the:	Northern District of Illinois					
Case number (If known)	W				Check if		
,						mended filing	ootmatitiss shouts 40
						ne as of the following p	ostpetition chapter 13 g date:
Official Fo	.,				MM /	DD / YYYY	
Sched	ule I: You	ır Income					12/15
supplying cor If you are sep separate shee	rect information. If yo arated and your spou	ise is not filing with you, top of any additional pa	ing jointly, and yo do not include in	our spous formation	e is living with about your so	you, include informa	ition about your spouse.
	employment		Dahtard			D.140	
If you have	more than one job,		Debtor 1			Debtor 2 or no	n-filing spouse
attach a se	parate page with	Employment status	☐ Employed			☐ Employed	
employers.			☑ Not employ	red		☐ Not employ	ed
Include par self-employ	t-time, seasonal, or /ed work.		11	/ T	.		
	n may include student aker, if it applies.	Occupation	Unemployed		Oriver)		
		Employer's name	Unemployed	•			
		Employer's address					
			Number Street			Number Street	
						-	
			City	State	ZIP Code	City	State ZIP Code
		How long employed the	re?			***************************************	
Part 2:	Give Details About	Monthly Income					
spouse unl	ess you are separated ur non-filing spouse ha	ive more than one employe	er, combine the info				
below. If yo	u need more space, a	tach a separate sheet to the	nis form.				
				Meticoperators	For Debtor 1	For Debtor 2 or non-filing spous	: G C Processory
List mont deduction.	hly gross wages, salas). If not paid monthly,	ary, and commissions (be calculate what the monthly	efore all payroll wage would be.	2. \$	0.00	\$	<u>.</u> .
3. Estimate	and list monthly over	time pay.		3. + \$	0.00	+ \$	-
4. Calculate	gross income. Add li	ne 2 + line 3.		4. \$	0.00	\$	

Case 18-06012 Doc 1 Filed 03/02/18 Entered 03/02/18 10:45:22 Desc Main Document Page 46 of 70 JIM OSHANA Debtor 1 Case number (if known) First Name Middle Name Last Name For Debtor 1 For Debtor 2 or non-filing spouse 0.00 Copy line 4 here..... 5. List all payroll deductions: 5a. Tax, Medicare, and Social Security deductions 5a. 0.00 5b. Mandatory contributions for retirement plans 5b. 0.00 5c. Voluntary contributions for retirement plans 0.00 5c. 0.00 5d. Required repayments of retirement fund loans 5d. 0.00 5e. Insurance 5e. 0.00 5f. Domestic support obligations 5f 0.00 5g. Union dues 5g 5h. Other deductions. Specify: 0.00 5h. 6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h. 6. 0.00 0.00 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total 0.00 monthly net income. 8a 0.00 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce 0.00 settlement, and property settlement. 8c 1,655.33 8d. Unemployment compensation Вd 8e. Social Security 0.00 8e 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. 0.00 Specify: 8f. 0.00 8g. Pension or retirement income 8g. 8h. Other monthly income. Specify: 0.00 8h. 9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h. 1,655.33 10. Calculate monthly income. Add line 7 + line 9. 1,655.33 0.00 1,655.33 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.

0.00 Specify: 11. + 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. 1,655.33 Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies 12. Combined monthly income

13. Do you expect an increase or decrease within the year after you file this form?

No. Yes. Explain: Maybe. I might try to return to work if I am able to medically.

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Fill in this in	nformation to identify	your case:				
Debtor 1	JIM	OSHAN	۱A	41.1. 1		
Debtor 2	First Name	Middle Name Last Name	Check if			
(Spouse, if filing)	First Name	Middle Name Last Name		mended fi		
United States	Bankruptcy Court for the:	Northern District of Illinonis			showing post; f the following	petition chapter 13
Case number				DD / YYYY		, 44.0.
(If known)			iviivi /	ווווי / טט		
Official F	orm 106J					
		ur Expenses				12/15
Be as comple	te and accurate as p	ossible. If two married people are filed, attach another sheet to this forr	ling together, both are equally n. On the top of any addition	y responsi al pages, v	ble for supply vrite your nam	ing correct
Part 1:	Describe Your Ho	ısehold				
1. Is this a joi	nt case?					
☑ No. Go	to line 2.	separate household?				
	No	,				
		le Official Form 106J-2, Expenses for	Separate Household of Debtor	2.		
2. Do you hav	ve dependents?	□ No		***************************************		
Do not list Debtor 2.	Debtor 1 and	Yes. Fill out this information for each dependent		BOOM MATERIAL PROPERTY AND A STATE OF THE ST	Dependent's age	Does dependent live with you?
Do not state names.	e the dependents'	· ·	Son	 -	27	☐ No ☑ Yes
			Daughter		24	□ No ☑ Yes
						☐ No
						Yes
						□ No □ Yes
						☐ Yes
				 .	***************************************	Yes
3. Do your ex	penses include	☑ No				
expenses of	of people other than nd your dependents?	₩ No ☐ Yes				
yoursen an	ia your dependents:		and the state of t	***************************************		manageria and a garageria agree of the first particles and the second
Part 2: Es	stimate Your Ongo	ing Monthly Expenses				
	of a date after the ba	r bankruptcy filing date unless you nkruptcy is filed. If this is a supplen				
, ,		n-cash government assistance if yo	u know the value of			
such assista	nce and have include	d it on Schedule I: Your Income (Of	ficial Form 106l.)		Your expe	nses
	or home ownership or the ground or lot.	expenses for your residence. Includ	e first mortgage payments and	4.	\$	1,774.31
If not incl	uded in line 4:					
4a. Real	estate taxes			4a.	\$	0.00
4b. Prop	erty, homeowner's, or	renter's insurance		4b.	\$	0.00
4c. Hom	e maintenance, repair,	and upkeep expenses		4c.	\$	150.00
4d. Hom	eowner's association o	or condominium dues		44	œ.	0.00

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Debtor 1 JIM OSHANA Case number (ut known)_____

		Your exp	oenses
5. Additional mortgage payments for your residence, such as home equity loans	5 .	\$	0.00
6. Utilities:			
6a. Electricity, heat, natural gas	6a.	\$	295.00
6b. Water, sewer, garbage collection	6b.	\$	
6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	
6d. Other, Specify:	6d.	\$	0.00
7. Food and housekeeping supplies	7.	\$ \$	750.00
8. Childcare and children's education costs	8.	\$	0.00
9. Clothing, laundry, and dry cleaning	9.	\$ \$	000.00
10. Personal care products and services	10.	\$	10.00
11. Medical and dental expenses	11.	\$	240.00
12. Transportation. Include gas, maintenance, bus or train fare.		_	240.00
Do not include car payments.	12.	\$	
13. Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	
14. Charitable contributions and religious donations	14.	\$	5.00
15. Insurance.Do not include insurance deducted from your pay or included in lines 4 or 20.			
15a. Life insurance	15a.	\$	0.00
15b. Health insurance	15b.	\$	0.00
15c. Vehicle insurance	15c.	\$	235.00
15d. Other insurance. Specify:	15d.	\$	0.00
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16,	\$	0.00
17. Installment or lease payments:			
17a. Car payments for Vehicle 1	17a.	\$	262.14
17b. Car payments for Vehicle 2	17b.	\$	0.00
17c. Other, Specify: Kane County Circuit Court Clerk	17c.	\$	250.00
17d. Other, Specify:	17d.	\$	0.00
 Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 	18.	\$	0.00
19. Other payments you make to support others who do not live with you.			
Specify:	19.	\$	0.00
20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom	1e.		
20a. Mortgages on other property	20a.	\$	0.00
20b. Real estate taxes	20b.	\$	0.00
20c. Property, homeowner's, or renter's insurance	20c.	\$	0.00
20d. Maintenance, repair, and upkeep expenses	20d.	\$	0.00
20e. Homeowner's association or condominium dues	20e.	\$	0.00

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Debtor	1	JIM First Name	Middle Name	Last Name	OSHANA	Case number (#	known)		
21. O t	t her . Sp	pecify:					21.	+\$	0.00
22. C a	liculate	your mon	thly expenses.					Annual Control of the	
22	a. Add	lines 4 throu	ugh 21.				22a.	\$	4,693.45
22	b. Copy	y line 22 (m	onthly expenses	for Debtor 2), if a	ny, from Official Form 10	6J-2	22b.	\$	0.00
22	c. Add	line 22a and	22b. The result	is your monthly e	xpenses.		22c.	\$	4,693.45
23. Cal	culate	your month	nly net income.						
23a			Ť	nthly income) froi	m Schedule I.		23a.	\$	1,655.33
23b.	. Сор	y your mont	hly expenses fro	m line 22c above			23b.	-\$	4,693.45
23c.			onthly expenses ur <i>monthly net ind</i>	from your monthl come.	y income.		23c.	\$	-3,038.12
24. Do	you ex	pect an inc	rease or decrea	se in your expe	nses within the year aft	er you file this form?			
					loan within the year or danger and a modification to the term				
Ø	No.								
	Yes.	Explain h	ere:						
		THE PERSON NAMED IN COLUMN TO THE PE							

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	formation to ide	entify your case:	
Debtor 1	JIM First Name	Middle Name	OSHANA Last Name
Debtor 2		mode Name	Fast (Adule
(Spouse, if filing)	First Name	Middle Name	Last Name
United States E Case number (If known)	Bankruptcy Court fo	or the: Northern District of I	llinois
Officia	Form 10	6Dec	

If two married people are filing together, both are equally responsible for supplying correct information.

Declaration About an Individual Debtor's Schedules

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

12/15

Sign Below	
Did you pay or agree to pay someone who is NOT an atto ✓ No ✓ Yes. Name of person	orney to help you fill out bankruptcy forms? Attach Bankruptcy Petition Preparer's Notice, Declaration, and
-	Signature (Official Form 119).
3-1-2019	Signature of Debtor 2 Date

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Fill in this in	formation to ide	entify your case:	
Debtor 1	JIM		OSHANA
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States E	Bankruptcy Court fo	or the: Northern District of Illinois	
Case number			
(If known)			

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Q v	t is your current Married Not married	marital status?				
\(\)	lo	rs, have you lived anywhere places you lived in the last 3 y	_			
	Debtor 1:		Dates Debtor 1 lived there	Debtor 2:		Dates Debtor 2 lived there
				☐ Same as Debtor 1		☐ Same as Debtor 1
	Number Stree	et .	From	Number Street		From
	City	State ZIP Code		City	State ZIP Code	ente i militari signi si silima dala kashada kashada kashada kashada kashada kashada kashada kashada kashada k
				☐ Same as Debtor 1		Same as Debtor 1
	Number Stree	et	From	Number Street		From To
	City	State ZIP Code		City	State ZIP Code	
state ☑ N	s <i>and territories</i> i lo	rs, did you ever live with a sp nclude Arizona, California, Idal ou fill out Schedule H: Your Co	no, Louisiana, Nevad	la, New Mexico, Puerto Ric	operty state or territory? (0 o, Texas, Washington, and	Community property Wisconsin.)

Part 2: Explain the Sources of Your Income

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or 1	JIM	OSHANA	Case nu	mber (if known)	
i	First Name Middle Name Last	Name			
Fill in the	have any income from employment total amount of income you received filing a joint case and you have income	d from all jobs and all bus	inesses, including part-tir	ne activities.	dar years?
□ No	Fill in the details.		·		
		Debtor 1		Debtor 2	
		Sources of income	Gross Income	Sources of income	Gross Income
		Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions an exclusions)
	m January 1 of current year until date you filed for bankruptcy:	✓ Wages, commissions, bonuses, tips✓ Operating a business	\$0.00	☐ Wages, commissions, bonuses, tips☐ Operating a business	\$
For	last calendar year:	Wages, commissions, bonuses, tips	\$ 51,835.00	Wages, commissions, bonuses, tips	
(Jan	uary 1 to December 31,2017	Operating a business	Φ	Operating a business	3
For the calend	the calendar year before that:	Wages, commissions, bonuses, tips	t tig til skapt til av gjörfyldideliga har den sem tradja og grågig med grygne engge av grygne og gr	Wages, commissions, bonuses, tips	ernandighariye e zamaniniyayayayayayayayayayayayayayayayayay
Fort		bonuses, ups	s 57,216.00	bondses, ups	\$
(Jand Did you r Include in unemploy gambling	receive any other income during the come regardless of whether that incoment, and other public benefit payment, and lottery winnings. If you are filing	ome is taxable. Examples nents; pensions; rental inc g a joint case and you hav	ous calendar years? s of other income are alin ome; interest; dividends; e income that you receiv	money collected from lawsu ed together, list it only once	its; royalties; and
Did you r Include in unemploy gambling List each	receive any other income during the come regardless of whether that incoment, and other public benefit payment, and other public benefit payment.	nis year or the two previone is taxable. Examples tents; pensions; rental income a joint case and you have	ous calendar years? s of other income are alin ome; interest; dividends; e income that you receiv	nony; child support; Social S money collected from lawsu ed together, list it only once	its; royalties; and
Old you r Include in unemploy gambling List each	receive any other income during the come regardless of whether that incoment, and other public benefit payment, and lottery winnings. If you are filing source and the gross income from e	nis year or the two previone is taxable. Examples tents; pensions; rental income a joint case and you have	ous calendar years? s of other income are alin ome; interest; dividends; e income that you receiv	nony; child support; Social S money collected from lawsu ed together, list it only once	its; royalties; and
(Jani Did you r Include in unemploy gambling List each	receive any other income during the come regardless of whether that incoment, and other public benefit payment, and lottery winnings. If you are filing source and the gross income from e	nis year or the two previous prome is taxable. Examples tents; pensions; rental incursions a joint case and you have each source separately. D	ous calendar years? s of other income are alin ome; interest; dividends; e income that you receiv	nony; child support; Social S money collected from lawsu ed together, list it only once t you listed in line 4.	its; royalties; and under Debtor 1. Gross Income from each source
(Jani Did you r Include in unemploy gambling List each M No Yes. F	receive any other income during the come regardless of whether that incoment, and other public benefit payment, and lottery winnings. If you are filing source and the gross income from e	nis year or the two previous is taxable. Examples tents; pensions; rental including a joint case and you have each source separately. Debtor 1 Sources of income	ous calendar years? s of other income are alinome; interest; dividends; e income that you receiv o not include income tha Gross income from each source (before deductions and	nony; child support; Social S money collected from lawsu ed together, list it only once t you listed in line 4. Debtor 2 Sources of income	Gross Income from each source (before deductions an exclusions)
(Jani Did you r Include in unemploy gambling List each M No Yes. F	receive any other income during the focus regardless of whether that income regardless of whether that incoment, and other public benefit payment, and lottery winnings. If you are filing source and the gross income from each fill in the details.	nis year or the two previous is taxable. Examples tents; pensions; rental including a joint case and you have each source separately. Debtor 1 Sources of income Describe below.	ous calendar years? s of other income are alinome; interest; dividends; e income that you receive onot include income that Gross income from each source (before deductions and exclusions)	nony; child support; Social S money collected from lawsu ed together, list it only once t you listed in line 4. Debtor 2 Sources of income Describe below.	Gross Income from each source (before deductions an exclusions)
(Jani Did you r Include in unemploy gambling List each Mo Yes. F	receive any other income during the come regardless of whether that income regardless of whether that incoment, and other public benefit payment and lottery winnings. If you are filing source and the gross income from each of the details. Fill in the details.	nis year or the two previous is taxable. Examples tents; pensions; rental including a joint case and you have each source separately. Debtor 1 Sources of income Describe below.	ous calendar years? s of other income are alinome; interest; dividends; e income that you receive onot include income that Gross income from each source (before deductions and exclusions)	nony; child support; Social S money collected from lawsu ed together, list it only once t you listed in line 4. Debtor 2 Sources of income Describe below.	Gross Income from each source (before deductions an exclusions)
(Janian Janian J	receive any other income during the focus regardless of whether that income regardless of whether that incoment, and other public benefit payment, and lottery winnings. If you are filing source and the gross income from each fill in the details.	nis year or the two previous is taxable. Examples sents; pensions; rental incigation of a joint case and you have each source separately. Debtor 1 Sources of income Describe below. Unemployment	ous calendar years? s of other income are alinome; interest; dividends; e income that you receiv o not include income that Gross income from each source (before deductions and exclusions) \$ 4,041.00 \$\$	nony; child support; Social S money collected from lawsu ed together, list it only once t you listed in line 4. Debtor 2 Sources of income Describe below.	Gross Income from each source (before deductions an exclusions)
Jane Did you r Include in unemploy gambling List each Yes. F Froi the For	receive any other income during the focus regardless of whether that income regardless of whether that it is source and the gross income from each of the following source and the gross income from each of the following source and the gross income from each of the following source and the gross income from each of the g	nis year or the two previous is taxable. Examples tents; pensions; rental incigation a joint case and you have each source separately. Debtor 1 Sources of income Describe below. Unemployment Unemployment	ous calendar years? s of other income are alinome; interest; dividends; e income that you receiv o not include income that Gross income from each source (before deductions and exclusions) \$ 4,041.00 \$	nony; child support; Social S money collected from lawsu ed together, list it only once t you listed in line 4. Debtor 2 Sources of income Describe below.	Gross income from each source (before deductions and exclusions) \$
Jane Did you r Include in unemploy gambling List each Ves. F Froi the For	receive any other income during the focus regardless of whether that income regardless income from each course and the gross income from each fill in the details. Fill in the details. The January 1 of current year until date you filed for bankruptcy: Last calendar year: The January 1 to December 31,2017	nis year or the two previous is taxable. Examples sents; pensions; rental income is a joint case and you have each source separately. Debtor 1 Sources of income Describe below. Unemployment Gambling	Gross income from each source (before deductions) \$ 4,041.00 \$ 990.00 \$ 7,418.00 \$	nony; child support; Social S money collected from lawsu ed together, list it only once t you listed in line 4. Debtor 2 Sources of income Describe below.	Gross Income from each source (before deductions an exclusions) \$

tor 1	JIM First Name Middle N	lame Last Name	OSHANA	Case nur	mber (if known)	
	WINDER	Last Marine				
art 3:	List Certain Payı	ments You Made Be	efore You Filed	or Bankruptcy		
	-					
		btor 2's debts primari	•			
☐ No.	Neither Debtor 1 n "incurred by an indi-	or Debtor 2 has prima vidual primarily for a pe	rily consumer deb rsonal, family, or ho	ots. Consumer debts are obusehold purpose."	defined in 11 U.S.C. § 101(8) as
	During the 90 days	before you filed for ban	kruptcy, did you pa	y any creditor a total of \$6	6,425* or more?	
	No. Go to line 7	•				
	total amou	nt you paid that creditor	. Do not include pa	6,425* or more in one or yments for domestic suppents to an attorney for this	oort obligations, such as	
					er the date of adjustment.	
☑ Yes	. Debtor 1 or Debtor	r 2 or both have prima	rily consumer deb	ts		
				y any creditor a total of \$6	600 or more?	
	☐ No. Go to line 7			•		
	_					
	creditor. De	each creditor to whom y o not include payments	ou paid a total of \$ for domestic suppo	600 or more and the total ort obligations, such as ch	I amount you paid that ild support and	
	alimony. A	lso, do not include payr	nents to an attorney	for this bankruptcy case		
			Dates of	Total amount paid	Amount you still owe	Was this payment for
			payment			
	Pennymac Creditor's Name	Loan Services	02/01/2018	\$5,322.00	\$197,980.00	☑ Mortgage
		44007	04/04/0040			☐ Car
	P.O. Box 51 Number Street	14307	01/01/2018			Credit card
			12/01/2017			Loan repayment
	L oo Angele	o CA 00051				Suppliers or vendors
	Los Angele	s CA 90051 State ZIP Cod				Other
	No. 18 (MANONAME INAUTORISTIC) ESTABABABABABABA ING MANONAME	enterellipheting migra proportion benefitiere garage eigen von von von von der benefit von der verbeiten der d		Northwest and the State Sta	TO THE WAY IN A POP COME IN A CONTROL OF THE WAY IN A	
				\$	\$	☐ Mortgage
	Creditor's Name					☐ Car
	Number Street					Credit card
						Loan repayment
						☐ Suppliers or vendors
	City	State ZIP Cod	A			Other
	C.I.y	0.0.0	•			
	alle digine i mandendiferen e meganomi para palapanga anapaman ay anapanga ay		ighan fift and an ang a a ang ad ga a and ga ga and de ang penadigang dea gail ga a deag dig a general and a a	¢		
	Creditor's Name			\$	\$	☐ Mortgage
						☐ Car
	Number Street		***************************************			Credit card
	Maniper Street					Loan repayment
	Mulliper Street					
	Manupat Street	***************************************				Suppliers or vendors Other

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btor 1	JIM			OSHANA	C	Case number (if known)	
	First Name	Middle Name	Last Name		•	oase Humber (# <i>known)</i>	
Insid corp agei	ders include you corations of which nt, including one	ir relatives; any ge ch you are an office	neral partners; re er, director, pers	elatives of any g on in control, or	eneral partners; pa owner of 20% or m	artnerships of whic nore of their voting	who was an insider? h you are a general partner; securities; and any managing r domestic support obligations,
A	No						
D ,	Yes. List all pay	ments to an inside	r.				
				Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
	Insider's Name			••••	\$	\$	
	Number Street						
	Number Saeet		7744				
	City	State	ZIP Code				
	and the second s	nde tite til til de til med stade for et en egen de men ege til til med et et et e	nd ndagad ann angle ann gan e y ag a an ga a a a g	e a e e e e e e e e e e e e e e e e e e	\$	\$	
	Insider's Name				Ψ	Ψ	
	Number Street						
	City	State	ZIP Code				
an in	nsider? ude payments o No	re you filed for ba n debts guaranteed ments that benefite	d or cosigned by	an insider.			n account of a debt that benefited
				Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
	Insider's Name				\$	\$	
	Number Street			-			
	City	State	ZIP Code				
	enga kata tau miki di kacampan pangan pangan da ana pengan pangan pangan pangan pangan pangan pangan pangan pa	- consensity dynamics on a stable set soft transmissed problems and in con-		THE PROPERTY OF THE PROPERTY O	mor experimental and a large state and a superior of the second of the s	ensemble en	
	Insider's Name				\$	\$	
	Number Street						
	City	State	ZIP Code				

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OSHANA

d contract disputes.	Iptcy, were you a party in any lav ury cases, small claims actions, div	vsuit, court action, or administrative provorces, collection suits, paternity actions,	roceeding? support or custody modificati
No Yes. Fill in the details.	Nature of the case	Court or agency	Status of the case
Case title Plote Construction, et.	Statutory penalty.	Circuit Court of Cook Count	
al. v. Jim Oshana		Court Name 50 W. Washington Street	On appeal
Case number 2017 L 1399		Number Street	□ Concluded 0602
Case title People of the State of	Statutory restitution.	Circuit Court of Kane Count	Pending
Illinois v. Jim Oshana		540 S. Randall Road	On appeal Concluded
Case number 2009 CF 1166	To the same of the	St. Charles IL 6	0174
	Describe the property	Date	Value of the property
0 11 1 11			\$
Creditor's Name			\$
Number Street	Explain what happend Property was re	epossessed. oreclosed. arnished.	\$
Number Street	Property was re Property was fo	epossessed. oreclosed. arnished. ttached, seized, or levied.	\$Value of the propert
Number Street	Property was re Property was for Property was go Property was at	epossessed. oreclosed. arnished. ttached, seized, or levied.	Value of the propert
Number Street City State ZII	Property was re Property was for Property was go Property was at	epossessed. preclosed. arnished. ttached, seized, or levied.	Value of the propert

JIM

Debtor 1

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btor 1	JIM		OSHANA	Case number (if known)	
	First Name	Middle Name Last N	lame		
. Withi	in 90 days bei	fore you filed for bankrur	ntcy did any creditor including	a hank or financial inetitut	ion, set off any amounts from your
acco	unts or refus	e to make a payment bec	ause vou owed a debt?	a bank or intancial institut	ion, set on any amounts from your
ZÍ N		o to make a payment see	ause you owed a desti		
U Y	es. Fill in the c	letails.			
				_	
			Describe the action the creditor t	ook	Date action Amount was taken
C	reditor's Name		germanical and a second control of the second of the secon		was taken
Ů.	Toulor 3 Hame				
					s
N	umber Street				
					and the state of t
Ci	ity	State ZIP Code	Last 4 digits of account number	·: XXXX	
			cy, was any of your property in	the possession of an assig	nee for the benefit of
credi	itors, a court-	appointed receiver, a cus	stodian, or another official?		
	lo				
☐ Y					
	-				
art 5:	I 1:-4 C4-	in Gifts and Contribu	4		
art 5;	List Certa	in Girts and Contribu	tions		
	,				
3. Withi	n 2 years beto	ore you filed for bankrupt	tcy, did you give any gifts with a	a total value of more than \$	600 per person?
⊠ N	lo				
		letails for each gift.			
	es. i iii iii tile e	letans for each gift.			
	Live of Charles of Artist	en i suoti en muse en en muse di un un un en			to and the second of the secon
	Gifts with a tota per person	al value of more than \$600	Describe the gifts		Dates you gave Value the gifts
- 2	per person				
Pe	erson to Whom You	Gave the Gift			<u> </u>
			Vermanne de la companya de la compan		\$
_			e de la constante de la consta		
N	umber Street				
<u></u>	ity	State ZIP Code			
U	·· <i>y</i>	State ZIF COUR	ACCUPATION OF THE PROPERTY OF		
P	erson's relations	hin to you	and the second		
• '	2.3011 0 1010110113	p 100			
		value of more than \$600	Describe the gifts		Dates you gave Value
p	er person		and the state of t		the gifts
					- Control of the Cont
_			THEORY		\$
P	erson to Whom You	u Gave the Gift	- Community		
					<u> </u>
			NAME AND ADDRESS OF THE PARTY O		
N	umber Street		* Parameters		
C	ity	State ZIP Code			TOTAL LINE AND ADDRESS OF THE ADDRES
,					
P	erson's relations	hip to you			

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r 1	JIM	OSHANA Case nu	imber (if known)	
	First Name Middle Name Las	t Name		
		ptcy, did you give any gifts or contributions witl	n a total value of more than \$	600 to any charity?
Ø		Authorities and		
	Yes. Fill in the details for each gift or con	tribution.		
	Gifts or contributions to charities	Describe what you contributed	Date you	Value
	that total more than \$600		contributed	
į	Charity's Name	· -		\$
		- i		\$
	Number Street			
ì	City State ZIP Code			
t 6	List Certain Losses			
	mot ocitain 2000co			
	Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pend	Date of your loss	Value of property lost
		claims on line 33 of Schedule A/B: Property.		
				\$
				-
_				
t 7	List Certain Payments or Tran	nsfers		
Wit	nin 1 year before you filed for bankrup	etcy, did you or anyone else acting on your beha	alf pay or transfer any proper	ty to anyone
	consulted about seeking bankruptcy	or preparing a bankruptcy petition? reparers, or credit counseling agencies for services	required in your banks into	
		eparers, or credit counseling agencies for services	required in your parikrupicy.	
	No Yes. Fill in the details.			
-pmt	100. i ili ili tile detallă.	Boundation of the Control	<u>.</u> .	
	Timothy S. Newbold Person Who Was Paid	Description and value of any property transferred	Date payment or transfer was made	Amount of payme
	191 Waukegan Road	Payment of \$500.00 on 01/04/2018	arraga ayarran argangangang andaga ayargang arraga ayar	
	Number Street		01/04/2018	\$500.0
	Suite 104			
	Northfield IL 60093			\$
	City State ZIP Code			
	timothynewbold@hotmail.com			*
	Email or website address			
	Person Who Made the Payment, if Not You		0 LV 10 LV 1	

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	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
Person Who Was Paid	-		
	-		\$
Number Street			\$
- The state of the	-	***************************************	
City State ZIP Code			
Email or website address		****	
Person Who Made the Payment, if Not You			
not include any payment or transfer that No Yes. Fill in the details.	you listed on line to.		
	Description and value of any property transferred	transfer was	Amount of pay
Person Who Was Paid		made Williams in the	
Number Street	-		\$
			\$
		1	
City State ZIP Code thin 2 years before you filed for bankru	ptcv. did vou sell. trade. or otherwise transfer any	property to anyone, other tha	n property
thin 2 years before you filed for bankru nsferred in the ordinary course of your	made as security (such as the granting of a security in ave already listed on this statement. Description and value of property Describe a		perty).
thin 2 years before you filed for bankru insferred in the ordinary course of your clude both outright transfers and transfers inot include gifts and transfers that you ha	business or financial affairs? made as security (such as the granting of a security is ave already listed on this statement. Description and value of property Describe a	nterest or mortgage on your prop	perty). Date transf
thin 2 years before you filed for bankru nsferred in the ordinary course of your lude both outright transfers and transfers not include gifts and transfers that you ha No Yes. Fill in the details.	business or financial affairs? made as security (such as the granting of a security is ave already listed on this statement. Description and value of property Describe a	nterest or mortgage on your prop	perty). Date transf
thin 2 years before you filed for bankru insferred in the ordinary course of your clude both outright transfers and transfers in not include gifts and transfers that you ha No Yes. Fill in the details.	business or financial affairs? made as security (such as the granting of a security is ave already listed on this statement. Description and value of property Describe a	nterest or mortgage on your prop	perty). Date transf
thin 2 years before you filed for bankru insferred in the ordinary course of your clude both outright transfers and transfers in not include gifts and transfers that you have No Yes. Fill in the details. Person Who Received Transfer Number Street	business or financial affairs? made as security (such as the granting of a security is ave already listed on this statement. Description and value of property Describe a	nterest or mortgage on your prop	perty). Date transf
thin 2 years before you filed for bankrus insferred in the ordinary course of your clude both outright transfers and transfers in not include gifts and transfers that you have No Yes. Fill in the details. Person Who Received Transfer Number Street City State ZIP Code	business or financial affairs? made as security (such as the granting of a security is ave already listed on this statement. Description and value of property Describe a	nterest or mortgage on your prop	perty). Date transf
thin 2 years before you filed for bankru insferred in the ordinary course of your clude both outright transfers and transfers inclinition of the property of t	business or financial affairs? made as security (such as the granting of a security is ave already listed on this statement. Description and value of property Describe a	nterest or mortgage on your prop	perty). Date transf

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		OSHANA	Case number (if kno		
	First Name Middle Name Las	t Name	occo nombol (mile		
Within	n 10 years before you filed for bankr	uptcv. did vou transfer any proper	ty to a self-settled true	t or similar device of u	which you
are a l	beneficiary? (These are often called a	asset-protection devices.)	ty to a sen-setaca a as	it of Sillinal device of w	mich you
M No					
☐ Ye	es. Fill in the details.				
		Phononitation of the Pat			
		Description and value of the prope	rty transferred		Date transfer was made
Na	ime of trust	_			
		The system of th			
~~~~~~~~~					
rt 8:	List Certain Financial Account	s, instruments, Safe Deposit	Boxes, and Storage	e Units	
	n 1 year before you filed for bankrup				honofit
	t i year before you filed for bankrup d, sold, moved, or transferred?	tcy, were any financial accounts of	or instruments neid in y	your name, or for your	benefit,
	d, sold, moved, or transferred? de checking, savings, money market	or other financial accounts: corti	ficator of donocity cha	roo in hanka aradit	
	rage houses, pension funds, coope			res in banks, credit un	ions,
☑ No		, ,			
🔲 Ye	es. Fill in the details.				
		Last 4 digits of account number	Type of account or	Date account was	Last balance befor
			Instrument	closed, sold, moved, or transferred	closing or transfer
		ing the more with the second of the second o			
N	ame of Financial Institution	XXXX	☐ Checking		\$
N.	umber Street		☐ Savings		
		_	☐ Money market		
			☐ Brokerage		
CI	State ZIP Code	Безантаруару мен құмыт қалысталару женерезізген жене қазақсын жене құмынақ құмынақ құмындару күмін женерезізг	Other_		- Make Palako deka Ariek kidanak da arawa na ana ana ana ana ana ana ana ana a
CI von vo.no	ity State ZIP Code	Languar at material para mandapan dan atau tangan at mandapan ang kalana karan sang sang sang kanana at mangak	nni di meta-dome kasterezza (-) kiyi nazez pronozonizanya, kidani kidani di jidiyete ya ya k	had 480 da alaanaa aanaa aanaa aanaa aanaa aanaa ah a	e essende Opphare entre freigne franklik og det entre freigne franklik og det entre entre freigne franklik og
9544 H 6,40	State ZIP Code	- - XXXX	Other_		никон станический под под тем на том стуг сей сей. \$
9544 H 6,40	т ображения в домните подоставления на применения на применения на применения в применения на применения на пр		nni di meta-dome kasterezza (-) kiyi nazez pronozonizanya, kidani kidani di jidiyete ya ya k		a consequence of the transport of the consequence o
yana majao Na	т ображения в домните подоставления на применения на применения на применения в применения на применения на пр		☐ Checking		station commence and an action of the state
ysee ws.po	ame of Financial institution		☐ Checking ☐ Savings		\$
Na Na	ame of Financial institution		☐ Checking ☐ Savings ☐ Money market		S.

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ebtor 1	JIM	OSHANA	Case number (if known)	
	First Name Middle Name	Last Name	Oddo Hamoer (# known)	
2. Have	e you stored property in a stora	age unit or place other than your home with	nin 1 year before you filed for bankrupto	:v?
<b>Z</b>	No	·		•
	Yes. Fill in the details.			
		Who else has or had access to it?	Describe the contents	Do you still
				have it?
			V000	<b>D.</b> .
	Name of Storage Facility	Name	-	□ No
	- •			☐ Yes
	Number Street	Number Street		
		CityState ZIP Code		
	City State ZII	PCode		
anglish tikan bah bagaa ang ta aana	Julio Diagona, Company Company Company Company		en e	
Part 9	Identify Property You	Hold or Control for Someone Else		
		ty that someone else owns? Include any p	roperty you borrowed from, are storing	for,
<b>∞</b>	hold in trust for someone.			
	Yes. Fill in the details.			
	res. Fin in the details.	NATIon and the second of the s	Barrett at	
		Where is the property?	Describe the property	Value
	Owner's Name			\$
		Number Street		
	Number Street		a received	
		City State ZIP	Code	
	City State Zii	P Code	And the state of t	
Part 1	0: Give Details About E	nvironmental information		
Ear the	number of Dort 40, the fallow	in a definition of the		
	purpose of Part 10, the follow			
₩ <i>EN</i> \ haz	/ironmental law means any ted vardous or toxic substances, w	eral, state, or local statute or regulation co astes, or material into the air, land, soil, su	ncerning pollution, contamination, release	ises of
		controlling the cleanup of these substance		ium,
		r property as defined under any environme	•	
util	ize it or used to own, operate, o	or utilize it, including disposal sites.	ental law, whether you now own, operat	e, or
		ng an environmental law defines as a hazai ollutant, contaminant, or similar term.	dous waste, nazardous substance, tox	iC
	· ·			
Report	t all notices, releases, and proc	eedings that you know about, regardless o	f when they occurred.	
24 Has	any governmental unit notified	d you that you may be liable or potentially I	iable under or in violeties of an envises	mental law?
24. i ius	any governmental unit nounet	you that you may be hable of potentially i	lable under or in violation of an environ	mental law ?
Ø	No			
	Yes. Fill in the details.			
		Governmental unit	Environmental law if you know it	ne ne e ma <b>rial de accide</b> e co-
			Environmental law, if you know it	Date of notice
	Name of site	Governmental unit		
		or or more diff		1
	Number Street	Number Street		<u>ลและยนแบบตลาลเห</u> นื้
		City State ZIP Code		
	City State ZIP	Code		

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ebtor 1	JIM	OSHANA	Case number (if known)	
	First Name Middle Name I	Last Name		
25 Hav	ve you notified any governmental uni	t of any release of homewhere was	45 min 12	
	No	t of any release of hazardous ma	teriai ?	
	Yes. Fill in the details.			
		Governmental unit	Environmental law, if you know it	Date of notice
			* A second secon	material programme and the second
	Name of site	Governmental unit		
	Number Street	Number Street		hanganara maga rigar h
	***************************************	City State ZIP Code	) )	
	City State ZIP Code	_		
e Un	Some contracts the section of the se	i del tenet in the comme at hence and at more minord accompany angular page and a section of company imperigat	rikket ermelde i handigilikatet etakoranoldir a'r etilori arar en ar arar arar yng djondododd lan mayarfelddodg	en anderson open open op state stiller a with the stiller by the stiller and the account of the stiller
20. ⊓av <b>Z</b> Í		administrative proceeding under	any environmental law? Include settlements an	id orders.
	Yes. Fill in the details.			
		Court or agency	Nature of the case	Status of the
	Case title			case 124
	oust tide	Court Name		Pending
	***			On appeal
		Number Street		☐ Concluded
	Case number	City State ZIF	Code	
		•	· · · · · · · · · · · · · · · · · · ·	
	<ul> <li>□ A sole proprietor or self-employe</li> <li>□ A member of a limited liability co</li> <li>□ A partner in a partnership</li> <li>□ An officer, director, or managing</li> <li>□ An owner of at least 5% of the vo</li> <li>No. None of the above applies. Go to</li> </ul>	ed in a trade, profession, or other impany (LLC) or limited liability procession executive of a corporation or equity securities of a corporation at the corporation of the corporation	oartnership (LLP)	
	Yes. Check all that apply above and		ousiness.	
		Describe the nature of the bus	iness Employer Identification num	
	Business Name		Do not include Social Securi	ity number or ITIN.
			EIN:	
	Number Street	Name of accountant or bookke	eper Dates business existed	
	* *************************************			
	City State ZIP Code		From To	
		Describe the nature of the bus	iness Employer Identification num	ber
	Business Name		Do not include Social Securi	ity number or ITIN.
			EIN:	
	Number Street	Name of accountant or bookke	eper Dates business existed	
	City State 7ID Code		From To	

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or 1	JIM First Name Middle Name Last	OSHANA Name	Case number (#known)
		Describe the nature of the business	Employer Identification number  Do not include Social Security number or ITIN.
	Business Name	er an energitet er <del>en e</del> n en	
	Number Street		EIN:
		Name of accountant or bookkeeper	Dates business existed
			From To
	City State ZIP Code		110111 10
***********			
		otcy, did you give a financial staten	nent to anyone about your business? Include all financial
	itutions, creditors, or other parties.		
ZÍ J	No Yes. Fill in the details below,		
_	Total III III dio dottalio acioni.	Date issued	
	Name	with the same of t	
	None	MM / DD / YYYY	
	Number Street		
	City State ZIP Code		
1	27 Sign Below		
l h	ave read the answers on this <i>Statemen</i>	t of Financial Affairs and any attac	hments, and I declare under penalty of perjury that the oncealing property, or obtaining money or property by fraud
an: in	connection with a bankruptcy case car U.S.C. §§ 152, 1341, 1519, and 3571.	n result in fines up to \$250,000, or i	mprisonment for up to 20 years, or both.
an: in	connection with a bankruptcy case car U.S.C. §§ 152, 1341, 1519, and 3571.	n result in fines up to \$250,000, or i	mprisonment for up to 20 years, or both.
an: in	connection with a bankruptcy case car U.S.C. §§ 152, 1341, 1519, and 3571.	result in fines up to \$250,000, or i	mprisonment for up to 20 years, or both.
anin 18	connection with a bankruptcy case car U.S.C. §§ 152, 1341, 1519, and 3571.  Signature of Debtor 1  Date 3 -1 - 2016	s result in fines up to \$250,000, or i	mprisonment for up to 20 years, or both.
an: in 18	connection with a bankruptcy case car U.S.C. §§ 152, 1341, 1519, and 3571.  Signature of Debtor 1  Date 3 -1 - 2016	s result in fines up to \$250,000, or i	mprisonment for up to 20 years, or both.
Dic	signature of Debtor 1  Date 3 - ( - 20) Signature additional pages to Your Signature of Debtor 1	Signature of Debto  Date  Statement of Financial Affairs for In	or 2  Individuals Filing for Bankruptcy (Official Form 107)?
Dic	connection with a bankruptcy case car U.S.C. §§ 152, 1341, 1519, and 3571.  Signature of Debtor 1  Date 3 - ( - 20) 4  d you attach additional pages to Your S  No  Yes  I you pay or agree to pay someone who	Signature of Debto  Date  Statement of Financial Affairs for In	out bankruptcy forms?

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Fill in this inf	ormation to ide	ntify your case:	
Debtor 1	JIM		OSHANA
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States E	3ankruptcy Court fo	or the: Northern District of Illinois	

### Check if this is an amended filing

#### Official Form 108

### Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

#### Part 1: List Your Creditors Who Have Secured Claims

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the proper as exempt on Schedule	
Creditor's name: HomeBridge Financial Services	☐ Surrender the property.	□ No	
Description of 695 Baxter Lane, Hoffman Estates,	Retain the property and redeem it.	☑ Yes	
property Securing debt: Illinois 60169	Retain the property and enter into a Reaffirmation Agreement.		
•	Retain the property and [explain]:		
Creditor's name: OneMain Consumer Loan, Inc.	☐ Surrender the property.	₩ No	
AP AND AND CONTROL OF THE CONTROL OF THE SHARE AND	Retain the property and redeem it.	☐ Yes	
Description of 2000 VW Cabrio Automobile. securing debt:	Retain the property and enter into a Reaffirmation Agreement.		
-	Retain the property and [explain]:		
Creditor's	☐ Surrender the property.	□ No	
name:	Retain the property and redeem it.	☐ Yes	
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.		
-	Retain the property and [explain]:		
Creditor's	☐ Surrender the property.	□No	
name:	Retain the property and redeem it.	☐ Yes	
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	••	
-	Retain the property and [explain]:		

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Debtor 1	JIM First Name	Middle Name	Last Name	SHANA	Case number (# known)
Part 2:	List You	Unexpired Per	rsonal Property Lea	coc	
For any fill in th	unexpired per e information l	sonal property le pelow. Do not list	ase that you listed in real estate leases. <i>Un</i>	Schedule G: Execu expired leases are	utory Contracts and Unexpired Leases (Official Form 106G), e leases that are still in effect; the lease period has not yet les not assume it. 11 U.S.C. § 365(p)(2).
		pired personal pr			Will the lease be assumed?
Less	sor's name: To	yota Financial	Services		□ No
Desc prop		d 2013 IS 250	eterken same er i eging, gen, nygetirinnig mer egin gegen	er general er e gener	Yes
Less	sor's name:	en de la companya de			□ No
Desc	cription of lease erty:	d			Yes
Less	or's name:		оба во обможен у уружущих соролоской обможения общество соролоску до общество общест	Kalandan jaragan jarag	□ No
Desc prope	cription of leased erty:	Moderlijke of kleinere in estiske klije enge ombasiske kleinopasiske.	M (Mittelling til myngen enliged) fyr fallen fi there en eg sener eg syne y sawn, ar se eggy y se	kontratatat tatapan kamalanna arkan, ing magamatantiga	Yes
Less	or's name:				□ No
Desc	cription of leased erty:	мійнін і тот штом і держення продоліна по подавліную по до подавліную по подавліную по подавліную по подавліну	and the second to the second s	nnerfallet framen fra her en Gorne fil de yeer en een een ee gegende gege	ото и так на сот такова во на проводила по на настрой на проводила по на настрой на нас
Less	or's name:				□ No
Desc	cription of leased erty:			en e	☐ Yes
Less	or's name:		4-materials of a magnetic in continuous and in versus a simulate seasonage magnetic appropriate seasonage as w		□ No
Desc prope	cription of leased erty:	j		eretti va ettekko jäjä Aktok vikuk vikuk ja kirja kirja kuun ja kaja ja	☐ Yes
Less	or's name:	эт э 200 год в 200 год	MATERIAL PROPERTY OF THE PROPE		□ No
Desc prope	cription of leased erty:	angon jere eigar ma an en greingamentegepenggenggenggenggenggenggenggengg	1996 об во 7 da во бого 6 об 600 ментов в дово в педера от во во во во во подобо во	et (Charled de Alghande de la committe de la commi	Yes
Part 3: Under persor	penalty of per	jury, I declare tha	it I have indicated my in unexpired lease.	ntention about any	y property of my estate that secures a debt and any
* (	2m	~	*		
Date _	ture of Debtor 1  3 - 1 - 2  MM/ DD / YY	018	Sig	e MM/ DD / YYYY	

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### United States Barkfuptcy Court

Northern District Of Illinois

In re:

OSHANA, JIM

Case No.

Debtor(s)

Chapter:

7

#### DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR

1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me,
	for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy
	case is as follows:

2. The source of the compensation paid to me was:

$\boxtimes$	Debtor
	Other: (Specify)

3. The source of compensation to be paid to me is:

[ [ ]	I B 1 :	
	Deptor	
ПП	Other: (Specifi	/\
Ш_	Totalor. (Opecia	<i>(1)</i>

- 4. I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.
- 5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:
  - a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
  - b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
  - c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings
  - d. [Other provisions as needed]: Negotiations with secured creditors to reduce to market value; exemption planning as needed.
- By agreement with the debtor(s), the above-disclosed fee does not include the following service:

  Representation of the debtors in any dischargeability actions, any document retrieval services, credit counseling and financial management course fees, post-discharge credit repair, judicial lien avoidances, preparation and filing of motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods, relief from stay actions, motions to redeem or any other adversary proceeding, or preparation and filing of reaffirmation agreements and applications.

#### **CERTIFICATION**

I certify that the foregoing is a complete statement of any agreement or arrangement forpayment for representation of the debtor(s) in this bankruptcy proceeding.

Date: 3-1-2018

Timothy S. Newbold, Attorney at Law 191 Waukegan Road, Suite 104 Northfield, Illinois 60093

Phone: 773-496-4400 Fax: 866-702-8151

Email: timothy@digiacomo-somers.com

ARDC No. 6288454

# UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

IN RE:	OSHANA, JIM		!		Case No.	
			 		Chapter:	7
		Debtor.				
				1		

#### **VERIFICATION OF CREDITOR MATRIX**

Under penalty of perjury, I (we) do hereby verify that the attached list of names and addresses of creditors is true and correct to the best of my (our) knowledge and belief.

Date:	03-01-2018	
Signature of D	ebtor:	Harrie Company of the
Signature of C	o-Debtor:	

Prepared By: TIMOTHY S. NEWBOLD 191 Waukegan Road, Suite 104 Northfield, Illinois 60093

Phone:

773-496-4400

Fax:

866-702-8151

ARDC:

6288454

HomeBridge Financial Services, LLC P.O. Box 100051 Kennesaw, GA 30156

PennyMac Loan Services, LLC P.O. Box 30597 Los Angeles, CA 90030

PennyMac Loan Services, LLC P.O. Box 514387 Los Angeles, CA 90051

OneMain Consumer Loan, Inc. P.O. Box 64 Evansville, IN 47701

OneMain Financial Golf Point Plaza 309 W. Golf Road, Suite 3 Schaumburg, IL 60195

OneMain P.O. Box 790368 St. Louis, MO 63179

OneMain 1338 N. Roselle Road Schaumburg, IL 60195

Toyota Financial Services P.O. Box 4102 Carol Stream, IL 60197

Advance Physical Med. Associates, SC 490 Lake Street, Suite 105 Roselle, IL 60172

Alexian Brothers Medical Center 21219 Network Place Chicago, IL 60673

Amita Health 22589 Network Place Chicago, IL 60673

Amita Health 22589 Network Place Chicago, IL 60673

Blatt, Hasenmiller Leibsker & Moore, LLC 10 S. LaSalle, Suite 2200 Chicago, IL 60603

Blatt, Hasenmiller Leibsker & Moore, LLC 211 Landmark Dr. Normal, IL 61761

Bone & Joint Center, PC 4211 N. Cicero, Suite 200 Chicago, IL 60641

Bruce Kolton, M.D. 21421 Network Place Chicago, IL 60673

Capital One Bank, N.A. P.O. Box 6492 Carol Stream, IL 60197

Capital One, N.A. P.O. Box 71087 Charlotte, NC 28272

Capital One Retail Services P.O. Box 71106 Charlotte, NC 28272

Columbia Hoffman Estates Medical Center 1555 N. Barrington Road Hoffman Estates, IL 60194

Credit One Bank P.O. Box 60500 City of Industry, CA 91716

Discover P.O. Box 6103 Carol Stream, IL 60197

Edward Atkins, M.D. 8135 N. Milwaukee Ave. Niles, IL 60714

First Premier Bank P.O. Box 5529 Sioux Falls, SD 57117

First Premier Bank P.O. Box 5529 Sioux Falls, SD 57117

Garofalo, Schreiber & Storm, Chtd. Attorneys at Law 55 West Wacker Drive, 10th Floor Chicago, IL 60601

Kane Court Clerk Circuit Court 540 S. Randall Road St. Charles, IL 60174

Kane County State's Attorney 37W777 Route 38, Suite 300 St. Charles, IL 60175

Kane County State's Attorney 530 S. Randall Road St. Charles, IL 60174

G&T Orthopaedics 1200 S. York Road, Suite 4190 Elmhurst, IL 60126

G&T Orthopaedics C/O Healthcare Automations 8751 W. Laraway Road Frankfort, IL 60423

Great Lakes P.O. Box 7860 Madison, WI 53707

Illinois Medical Group 4211 N. Cicero Chicago, IL 60641

LabPro, Inc. P.O. Box 5988, Dept. 20-5019 Carol Stream, IL 60197

Lowe's/Synchrony Bank P.O. Box 530914 Atlanta, GA 30353

Synchrony Bank

Attn: Bankruptcy Dept. P.O. Box 965060 Orlando, FL 32896

Molecular Imaging 28489 Network Place Chicago, IL 60673

NWHC Hoffman Estates Office 2360 Hassell Road, Suite F Hoffman Estates, IL 60169

Physicians Immediate Care - Chicago P.O. Box 15473 Loves Park, IL 61111

Robert C. Demke, M.D. P.O. Box 488 Westmont, IL 60559

Radiological Consultants of Woodstock 9410 Compubill Drive Orland Park, IL 60462

Sherman Family Healthcare 2320 Royal Boulevard Elgin, IL 60123